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=> s stutter? or ch dysfluen? or dysarthr? or speech block? or logospasm
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L4 32929 STUTTER? OR SPEECH DYSFLUEN? OR DYSARTH? OR SPEECH BLOCK? OR
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29 FILES SEARCHED

L5 2 L4

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L5 ANSWER 1 CAPLUS COPYRIGHT 2001 ACS
ACCESSION NUMBER 2001:100965 CAPLUS
DOCUMENT NUMBER 134:141757
TITLE: Methods and compositions using GABA receptor
modulators for alleviating **stuttering**
INVENTOR(S): Murphy, John J.; D'orlando, Kay Jorgenson
PATENT ASSIGNEE: Interneuron Pharmaceuticals, Inc., USA
SOURCE: PCT Int. Appl., 22 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUMBER: 1
PATENT INFORMATION:

| PATENT NO. | KIND | DATE | APPLICATION NO. | DATE |
|---|---|-------------------|-----------------|----------|
| WO 2001008 | A2 | 20010208 | WO 2000-US20402 | 20000727 |
| W: AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW, AZ, BY, KG, KZ, MD, RU, TJ, TM | | | | |
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| PRIORITY APPLN.: | | | US 1999-362691 | 19990729 |
| OTHER SOURCE(S): | | MARPAT 134:141757 | | |
| AB | Methods of treating stuttering include treating people with .gamma.-aminobutyric acid (GABA) receptor modulators, including cyclopyrrolones. A second active agent may be used with GABA receptor modulators. Active enantiomers, active metabolites, and pharmaceutically acceptable salts of GABA receptor modulators, including cyclopyrrolones, are acceptable components of the compns. The cyclopyrrolone class of modulators includes pagoclone , suriclone, zopiclone, 2-(7-chloro-1-naphthylidene-5-nor-1H-indolizin-3-yl)-3-(5-methyl-2-oxohexyl)isoindolin-1-one, 2-(7-chloro-1-naphthylidene-5-nor-1H-indolizin-3-yl)-3-(5-methyl-2-oxohexyl)isoindolin-1-yl-4-acetamidate, and 2-(7-chloro-1,8-naphthylidene-5-nor-1H-indolizin-3-yl)-3-(5-methyl-5-hydroxy-2-oxohexyl)-1-isoindolinone. | | | |
| TI | Methods and compositions using GABA receptor modulators for alleviating stuttering | | | |
| AB | Methods of treating stuttering include treating people with .gamma.-aminobutyric acid (GABA) receptor modulators, including cyclopyrrolones. A second active agent may be used with GABA receptor modulators. Active enantiomers, active metabolites, and pharmaceutically acceptable salts of GABA receptor modulators, including cyclopyrrolones, are acceptable components of the compns. The cyclopyrrolone class of modulators includes pagoclone , suriclone, zopiclone, 2-(7-chloro-1-naphthylidene-5-nor-1H-indolizin-3-yl)-3-(5-methyl-2-oxohexyl)isoindolin-1-one, 2-(7-chloro-1-naphthylidene-5-nor-1H-indolizin-3-yl)-3-(5-methyl-2-oxohexyl)isoindolin-1-yl-4-acetamidate, and 2-(7-chloro-1,8-naphthylidene-5-nor-1H-indolizin-3-yl)-3-(5-methyl-5-hydroxy-2-oxohexyl)-1-isoindolinone. | | | |
| ST | GABA receptor modulator stuttering treatment; cyclopyrrolone compd stuttering treatment | | | |
| IT | Drug delivery systems (GABA receptor modulators for alleviating stuttering) | | | |
| IT | GABA receptor modulators for alleviating stuttering | | | |
| RL: BPR | 1 process); BSU (Biological study, unclassified); BIOL | | | |

| | | |
|----|----------------|---|
| | (Biologic | ; PROC (Process) |
| | (GABA | modulators for alleviating stuttering) |
| IT | GABA agon | |
| | (GABA | receptor modulators for alleviating stuttering) |
| IT | GABA recep | |
| | RL: BPR | al process); BSU (Biological study, unclassified); BIOL |
| | (Biologic | ; PROC (Process) |
| | (GABA | receptor modulators for alleviating stuttering) |
| IT | Brain, d | |
| | (Gill | Tourette syndrome; GABA receptor modulators for |
| | allevi | stuttering) |
| IT | Drug deliv | tems |
| | (buccal | receptor modulators for alleviating stuttering) |
| IT | Proteins, | c or class |
| | RL: BAC | al activity or effector, except adverse); THU |
| | (Therape | ; BIOL (Biological study); USES (Uses) |
| | (diazep | ing inhibitory protein and fragments; GABA receptor |
| | modulat | alleviating stuttering) |
| IT | Nervous s | |
| | (disea | tering; GABA receptor modulators for |
| | allevi | stuttering) |
| IT | Drug deliv | tems |
| | (epidur | A receptor modulators for alleviating stuttering |
| |) | |
| IT | Drug deliv | tems |
| | (inject | m.; GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (inject | v.; GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (inject | c.; GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (intrac | entricular; GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (intrac | GABA receptor modulators for alleviating |
| | stutter | |
| IT | Behavior | |
| | (motor | er, motor tic; GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (nasal; | receptor modulators for alleviating stuttering) |
| IT | Drug deliv | tems |
| | (oral; | receptor modulators for alleviating stuttering) |
| IT | Drug deliv | tems |
| | (parent | GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (recta | receptor modulators for alleviating stuttering) |
| IT | Disease, | |
| | (speed | ; GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (transd | GABA receptor modulators for alleviating |
| | stutter | |
| IT | Drug deliv | tems |
| | (vagin | receptor modulators for alleviating stuttering |
| |) | |

IT 50-06-6, Phenobarbital, biological studies 50-06-6D, Phenobarbital, enantiomers and metabolites 53-43-0, Dehydroepiandrosterone, enantiomers and metabolites 57-43-2, Amobarbital 57-43-2D, A 57-83-0, Progesterone, biological studies 57-83-0D, Progesterone, enantiomers and metabolites 58-25-3, Chlordiazepoxide 58-25-3D, Chlordiazepoxide, enantiomers and metabolites 76-73-3, Secobarbital 76-73-3D, Secobarbital, enantiomers and metabolites 76-74-4, Pentobarbital 76-74-4D, Pentobarbital, enantiomers and metabolites 76-75-5, Thiopental 76-75-5D, Thiopental, enantiomers and metabolites 77-02-1, Aprobarbital 77-02-1D, Aprobarbital, enantiomers and metabolites 77-26-9, Butalbital 77-26-9D, Butalbital, enantiomers and metabolites 115-38-8, Mephobarbital 115-38-8D, Mephobarbital, enantiomers and metabolites 125-40-6, Butabarbital 125-40-6D, Butabarbital, enantiomers and metabolites 145-13-1, Pregnenolone 145-13-1D, Pregnenolone, enantiomers and metabolites 151-83-7, Methohexital 151-83-7D, Methohexital, enantiomers and metabolites 439-14-5, Diazepam 439-14-5D, Diazepam, enantiomers and metabolites 485-49-4, Bicuculline 485-49-4D, Bicuculline, enantiomers and metabolites 516-54-1, Allopregnanolone 516-54-1D, Allopregnanolone, enantiomers and metabolites 516-55-2, Allopregnanolone 516-55-2D, Allopregnanolone, enantiomers and metabolites 567-03-3, Tetrahydrodeoxycorticosterone 567-03-3D, Tetrahydrodeoxycorticosterone, enantiomers and metabolites 604-75-1, Oxazepam 604-75-1D, Oxazepam, enantiomers and metabolites 846-49-1, Lorazepam 846-49-1D, Lorazepam, enantiomers and metabolites 846-50-4, Temazepam 846-50-4D, Temazepam, enantiomers and metabolites 1005-93-2, Etbicuphat 1005-93-2D, Etbicuphat, enantiomers and metabolites 1134-47-0, Baclofen 1134-47-0D, Baclofen, enantiomers and metabolites 1449-89-4, Mebicuphat 1449-89-4D, Mebicuphat, enantiomers and metabolites 1622-62-4, Flunitrazepam 1622-62-4D, Flunitrazepam, enantiomers and metabolites 2078-54-8, Propofol 2078-54-8D, Propofol, enantiomers and metabolites 2955-38-6, Prazepam 2955-38-6D, Prazepam, enantiomers and metabolites 3289-22-3, Flucyben 3289-22-3D, Flucyben, enantiomers and metabolites 4406-37-5, Pregnanolone 4406-37-5D, Pregnanolone, enantiomers and metabolites 17617-23-1, Flurazepam 17617-23-1D, Flurazepam, enantiomers and metabolites 17617-45-7, Picrotoxinin 17617-45-7D, Picrotoxinin, enantiomers and metabolites 21416-53-5, Picrotin 21416-53-5D, Picrotin, enantiomers and metabolites 23092-17-3, Halazepam 23092-17-3D, Halazepam, enantiomers and metabolites 23930-19-0, Triazolam 23930-19-0D, Triazolam, enantiomers and metabolites 28911-01-5, Alprazolam 28911-01-5D, Alprazolam, enantiomers and metabolites 29617-43-4, Estazolam 29617-43-4D, Estazolam, enantiomers and metabolites 33125-97-2, Etomidate 33125-97-2D, Etomidate, enantiomers and metabolites 34985-87-0, Chlorazepam 34985-87-0D, Chlorazepam, enantiomers and metabolites 36104-80-0, Camazepam 36104-80-0D, Camazepam, enantiomers and metabolites 36735-22-5, Quazepam 36735-22-5D, Quazepam, enantiomers and metabolites 43200-80-2, Zopiclone 43200-80-2D, Zopiclone, enantiomers and metabolites 51052-72-3, Isobicyclazepam 51052-72-3D, Isobicyclazepam, enantiomers and metabolites 51486-74-9, Propylbicyclazepam 51486-74-9D, Propylbicyclazepam, enantiomers and metabolites 52463-83-9, Pinazepam 52463-83-9D, Pinazepam, enantiomers and metabolites 53813-83-5, Suriclone 53813-83-5D, Suriclone, enantiomers and metabolites 57109-90-7, Chlorazepate 57109-90-7D, Chlorazepate, enantiomers and metabolites 59467-70-8, Midazolam 59467-70-8D, Midazolam, enantiomers and metabolites 109370-34-5, Avermectin B

109370-34-5, Suriclon B, enantiomers and metabolites 117705-18-7
 117705-18-7, Suriclon B, enantiomers and metabolites 133737-32-3,
Pagoclone 133737-48-1, **Pagoclone**, enantiomers
 and metabolites 133737-48-1 133737-48-1D, enantiomers and metabolites
 153046-19-6, Suriclon B, enantiomers and metabolites 224790-70-9,
 Cloflubicyne, 224790-70-9D, Cloflubicyne, enantiomers and metabolites
 224790-71-0, Etbicthythionat 224790-71-0D, Etbicthythionat, enantiomers and
 metabolites
 RL: BAC (Biological activity or effector, except adverse); THU
 (Therapeutic use); BIOL (Biological study); USES (Uses)
 (GABA receptor modulators for alleviating **stuttering**)

L5 ANSWER 2 OF 3 LIT
 ACCESSION NUMBER: 1:3118 TOXLIT
 DOCUMENT NUMBER: 134-141757Z
 TITLE: Methods and compositions using GABA receptor modulators
 for

alleviating **stuttering**.
 AUTHOR: Murphy JJ; D'orlando KJ
 SOURCE: (1). PCT Int. Appl. PATENT NO. 018670 02/08/2001
 (Interneuron Pharmaceuticals, Inc.).
 EN: PIXXD2.

PUB. COUNTRY: UNITED STATES
 DOCUMENT TYPE: Patent
 FILE SEGMENT:
 LANGUAGE: English
 OTHER SOURCE: 134:141757
 ENTRY MONTH: 03

AB Methods of treating **stuttering** include treating people with
 .gamma.-aminobutyric acid (GABA) receptor modulators, including
 cyclopyrrolones. A second active agent may be used with GABA receptor
 modulators. Enantiomers, active metabolites, and pharmaceutically
 acceptable salts of GABA receptor modulators, including cyclopyrrolones,
 are acceptable components of the compns. The cyclopyrrolone class of
 modulators includes **pagoclone**, suriclone, zopiclone,
 2-(7-chloro-1,8-naphthyridin-1,8-yl)-3-(5-methyl-2-oxohexyl)isoindolin-1-
 one, 2-(7-chloro-1,8-naphthyridin-1,8-yl)isoindolin-1-yl-4-
 acetamidobutyl, and 2-(7-chloro-1,8-naphthyridin-2yl)-3-(5-methyl-5-
 hydroxy-1-oxohexyl)-1-isoindolinone.

TI Methods and compositions using GABA receptor modulators for alleviating
stuttering.

AB Methods of treating **stuttering** include treating people with
 .gamma.-aminobutyric acid (GABA) receptor modulators, including
 cyclopyrrolones. A second active agent may be used with GABA. . . .
 acceptable salts of GABA receptor modulators, including cyclopyrrolones,
 are acceptable components of the compns. The cyclopyrrolone class of
 modulators includes **pagoclone**, suriclone, zopiclone,
 2-(7-chloro-1,8-naphthyridin-1,8-yl)-3-(5-methyl-2-oxohexyl)isoindolin-1-
 one, 2-(7-chloro-1,8-naphthyridin-1,8-yl)isoindolin-1-yl-4-
 acetamidobutyl, and 2-(7-chloro-1,8-naphthyridin-2yl)-3-(5-methyl-5-
 hydroxy-1-oxohexyl)-1-isoindolinone.

ST GABA receptor modulator **stuttering** treatment; cyclopyrrolone
 compd stuttr treatment

=> s gaba or gamma-aminobutyric acid
 11 FILES SEARCHED
 20 FILES SERIALIZED
 29 FILES SELECTED
 39 FILES SEARCHED

52 FILES SEARCHED
L6 2408 L6 GAMMA AMINO BUTYRIC ACID

=> s 16 and 17
45 FILES SEARCHED
L7 147 L7

=> duplicate
ENTER REMOVE, ID ONLY, OR (?):remove
ENTER L# LIST OF 17
DUPLICATE IS 17 FILE IN 'ADISINSIGHT, BIOCOMMERCE, DGENE, DRUGLAUNCH,
DRUGMONOG2, DRUG, FOREGE, GENBANK, KOSMET, MEDICONF, PHAR, SYNTHLINE'.
ANSWERS FROM THE 3 WILL BE CONSIDERED UNIQUE
DUPLICATE PRESENT 'ADISALERTS, ADISINSIGHT, BIOSIS, CAPLUS, DRUGB,
DRUGU, EMBAL, EMBASE, BIOBASE, JICST-EPLUS, MEDLINE, PASCAL, PHIN, PROMT,
SCISEARCH, TOXLIT, USPATFULL, WPIDS'
KEEP DUPLICATES MORE THAN ONE FILE? Y/(N):n
PROCESSING COMPLETE FOR L7
L8 147 L8 DATE REMOVE L7 (27 DUPLICATES REMOVED)

=> s 16 (s) 17
38 FILES SEARCHED
L9 147 L9

=> duplicate
ENTER REMOVE, ID ONLY, OR (?):remove
ENTER L# LIST OF 19
DUPLICATE IS 19 FILE IN 'ADISINSIGHT, BIOCOMMERCE, DGENE, DRUGLAUNCH,
DRUGMONOG2, DRUG, FOREGE, GENBANK, KOSMET, MEDICONF, PHAR, SYNTHLINE'.
ANSWERS FROM THE 3 WILL BE CONSIDERED UNIQUE
DUPLICATE PRESENT 'BIOSIS, CAPLUS, DRUGB, DRUGU, EMBAL, EMBASE,
JICST-EPLUS, MEDLINE, PASCAL, SCISEARCH, TOXLINE, TOXLIT, USPATFULL, WPIDS'
KEEP DUPLICATES MORE THAN ONE FILE? Y/(N):n
PROCESSING COMPLETE FOR L9
L10 147 L10 DATE REMOVE L9 (16 DUPLICATES REMOVED)

=> d ti 1-5

L10 ANSWER 1 OF 1 PLUS COPYRIGHT 2001 ACS
TI Methods and conditions using **GABA** receptor modulators for
alleviating anxiety

L10 ANSWER 1 OF 1 TOXLIT
TI Methods and conditions using **GABA** receptor modulators for
alleviating anxiety.

L10 ANSWER 1 OF 1 USPATFULL
TI Guanidine heterocycle compounds useful as alpha-2 adrenoceptor
agonists

L10 ANSWER 1 OF 1 EMBAL COPYRIGHT 2001 ELSEVIER SCI. B.V.DUPLICATE 1
TI Baclofen in Tourette syndrome: A double-blind,
placebo-controlled, crossover trial.

L10 ANSWER 1 OF 1 PLUS COPYRIGHT 2001 ACS DUPLICATE 2
TI Treatment of post-traumatic stress disorder, obsessive-compulsive
disorder and related psychiatric disorders

=> d ti 5-45

- L10 ANSWER 05 PLUS COPYRIGHT 2001 ACS DUPLICATE 2
TI Treatment of traumatic stress disorder, obsessive-compulsive disorder and related psychiatric disorders
- L10 ANSWER 01 PATFULL
TI 2-imino-1-methyl-5H-indole compounds useful as alpha-2 adrenoceptor agonists
- L10 ANSWER 01 PATFULL
TI Allele-specific diagnosis of reward deficiency syndrome and treatment
- L10 ANSWER 05 PATFULL
TI 6-(2-amino-1-methyl-5H-indol-3-yl)quinoxaline compounds useful as alpha-2 adrenoceptor agonists
- L10 ANSWER 01 PATFULL
TI 2-imino-1-methyl-5H-benzoxazole compounds useful as alpha-2 adrenoceptor agonists
- L10 ANSWER 01 PATFULL
TI Methods for treating tardive dyskinesia and other movement disorders using GABA-A receptor antagonists
- L10 ANSWER 01 IDS COPYRIGHT 2001 DERWENT INFORMATION LTD
TI Identification of compounds of interest and relevance to neurological disorders or dysfunction. Parkinson's disease involves use of biological array including those associated with neurotransmitter molecules.
- L10 ANSWER 01 IDS COPYRIGHT 2001 DERWENT INFORMATION LTD
TI Treating movement disorders using agents which increase GABA-A neurotransmission and decrease NMDA-glutamate neurotransmission.
- L10 ANSWER 01 BASE COPYRIGHT 2001 ELSEVIER SCI. B.V.
TI Reward deficiency syndrome: A biogenetic model for the diagnosis and treatment of obsessive, addictive, and compulsive behaviors.
- L10 ANSWER 01 BIOSIS COPYRIGHT 2001 BIOSIS
TI Reward deficiency syndrome: A biogenetic model for the diagnosis and treatment of obsessive, addictive, and compulsive behaviors.
- L10 ANSWER 01 PLUS COPYRIGHT 2001 ACS DUPLICATE 3
TI Methods for treating movement disorders simultaneously acting as NMDA-type glutamate receptor antagonists and GABA-A receptor agonists for treating tardive dyskinesia and other movement disorders
- L10 ANSWER 01 EXLIT
TI Methods for treating movement disorders simultaneously acting as NMDA-type glutamate receptor antagonists and GABA-A receptor agonists for treating tardive dyskinesia and other movement disorders.
- L10 ANSWER 01 PATFULL
TI 2-Imino-1-methyl-5H-indole heterocyclic compounds useful as alpha-2 adrenoceptor agonists
- L10 ANSWER 01 PATFULL

TI 7-(2-amino)quinoline compounds useful as alpha-2
adren

L10 ANSWER 1 UNPATFULL
TI 2-imino heterocyclic compounds useful as alpha-2
adren

L10 ANSWER 1 UNPATFULL
TI 6-(2-amino) quinolines useful as alpha-2 adrenoceptor
agonis

L10 ANSWER 2 UNPATFULL
TI Use of in treating psychiatric disorders

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 4
TI Treatment of A-uptake related disorders - used for e.g. cluster
headache, alcohol withdrawal symptoms, spasticity, growth
disturbance, chorea dyskinesia or alcohol abuse.

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 4
TI Autoantibodies to glutamate decarboxylase in a patient with spinocerebellar
degenera

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 4
TIEN Association of a Tourette-like syndrome with ofloxacin

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 4
TI Combination of sugars and amino acids, opt with other drugs - for
treatment of Alzheimer's disease, depression, hair loss, cancers,
hyperten

L10 ANSWER 2 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 5
TI Neurochemical and some related psychopharmacological aspects of
Tourette's
syndrome

L10 ANSWER 1 MEDLINE DUPLICATE 6
TI Resolution of dysarthria in multiple sclerosis by treatment with weak
electron

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 5
TI Pharmacology of Controversy of CNS Stimulants in Gilles de la Tourette's
Syndrome

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 5
TI Neurotoxicity of beta-Lactam Antibiotics: Predisposing Factors and
Pathoge

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 5
TI Central Nervous System Effects of Various Antibacterial Compounds.

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 5
TI The Effect of Different Vigabatrin Treatment Regimens on CSF
Biochemistry
and Seizure Control in Epileptic Patients.

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 5
TI A Case of Lactic Acidemia Type I: Effect of Riboflavin and Carnitine.

L10 ANSWER 1 BIOSIS COPYRIGHT 2001 BIOSIS DUPLICATE 5

PATENT INFORMATION

| PATENT NO. | INVENTOR | DATE | APPLICATION NO. | DATE |
|---------------|---|------------------|-----------------|----------|
| WO 20010 | | 20010208 | WO 2000-US20402 | 20000727 |
| W: | AL, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, IN, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, MA, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU, ZA, ZW | | | |
| RW: | KE, S, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG | | | |
| PRIORITY APPL | | | US 1999-362691 | 19990729 |
| OTHER SOURCE | | ERPAT 134:141757 | | |
| AB | Methods for treating stuttering include treating people with .gamma.-aminobutyric acid (GABA) receptor modulators, including cyclopyrrolones. A second active agent may be used with GABA receptor modulators. The active agents are enantiomers, active metabolites, and pharmaceutically acceptable salts of GABA receptor modulators, including cyclopyrrolones, are acceptable components of the compns. The cyclopyrrolone class of modulators includes zopiclone, suriclone, zopiclone, 2-(7-chloro-2-naphthyl)-3-(5-methyl-2-oxohexyl)isoindolin-1-one, 2-(7-chloro-2-naphthyl)-3-(5-methyl-2-oxohexyl)isoindolin-1-yl-4-acetamidobutyrate, and 2-(7-chloro-2-naphthyl)-3-(5-methyl-5-hydroxy-2-oxohexyl)-1-isoindolin-1-yl-4-acetamidobutyrate. | | | |
| TI | Methods for treating stuttering using GABA receptor modulators for alleviating stuttering . | | | |
| AB | Methods for treating stuttering include treating people with .gamma.-aminobutyric acid (GABA) receptor modulators, including cyclopyrrolones. A second active agent may be used with GABA receptor modulators. The active agents are enantiomers, active metabolites, and pharmaceutically acceptable salts of GABA receptor modulators, including cyclopyrrolones, are acceptable components of the compns. The cyclopyrrolone class of modulators includes zopiclone, suriclone, zopiclone, 2-(7-chloro-2-naphthyl)-3-(5-methyl-2-oxohexyl)isoindolin-1-one, 2-(7-chloro-2-naphthyl)-3-(5-methyl-2-oxohexyl)isoindolin-1-yl-4-acetamidobutyrate, and 2-(7-chloro-2-naphthyl)-3-(5-methyl-5-hydroxy-2-oxohexyl)-1-isoindolin-1-yl-4-acetamidobutyrate. | | | |
| ST | GABA receptor modulators for stuttering treatment; cyclopyrrolones for stuttering treatment | | | |
| IT | Drug delivery system for stuttering treatment (GABA receptor modulators for alleviating stuttering) | | | |
| IT | GABA receptor modulators for alleviating stuttering (RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study, unclassified); DC (Process) (GABA receptor modulators for alleviating stuttering)) | | | |
| IT | GABA agonists for alleviating stuttering (GABA agonists for modulators for alleviating stuttering) | | | |
| IT | GABA receptor modulators for alleviating stuttering (RL: BPR (Biological process); BSU (Biological study, unclassified); BIOL (Biological study, unclassified); DC (Process) (GABA receptor modulators for alleviating stuttering)) | | | |

IT Brain, central (Gilman, 1980) "stuttering syndrome; **GABA** receptor modulators for alleviating **stuttering**)

IT Drug delivery systems (buccal) **GABA** receptor modulators for alleviating **stuttering**

IT Proteins, amino acid class
 RL: BAC (Biological activity or effector, except adverse); THU (Therapeutic use); BIL (Biological study); USES (Uses)
 (diarrhea) **GABA** receptor modulators for alleviating **stuttering**)

IT Nervous system (disorders) **GABA** receptor modulators for alleviating **stuttering**)

IT Drug delivery systems (epilepsy) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (infants) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (infants) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (infants) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (infants) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (infants) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (infants) **GABA** receptor modulators for alleviating **stuttering**

IT Behavior (motoric) **GABA** receptor modulators for alleviating **stuttering**)

IT Drug delivery systems (nasal) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (oral) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (parenteral) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (rectal) **GABA** receptor modulators for alleviating **stuttering**

IT Diseases, neuromuscular (spastic) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (topical) **GABA** receptor modulators for alleviating **stuttering**

IT Drug delivery systems (vaginal) **GABA** receptor modulators for alleviating **stuttering**

IT 50-06-01, 50-06-6D, Phenobarbital, enantiomers, 53-43-0, Dehydroepiandrosterone 53-43-0D, Dehydroepiandrosterone, enantiomers and metabolites 57-43-2, Amobarbital

57-43-2D, Amobarbital, enantiomers and metabolites 57-83-0,
 Progesterone, biological studies 57-83-0D, Progesterone, enantiomers
 and
 metabolites 58-25-3, Chlordiazepoxide 58-25-3D, Chlordiazepoxide,
 enantiomers and metabolites 76-73-3, Secobarbital 76-73-3D,
 Secobarbital, enantiomers and metabolites 76-74-4, Pentobarbitone
 76-74-4D, Pentobarbitone, enantiomers and metabolites 76-75-5,
 Thiopental 76-75-5D, Thiopental, enantiomers and metabolites 77-02-1,
 Aprobarbital 77-02-1D, Aprobarbital, enantiomers and metabolites
 77-26-9, Butalbital 77-26-9D, Butalbital, enantiomers and metabolites
 115-38-8, Mephobarbital 115-38-8D, Mephobarbital, enantiomers and
 metabolites 125-40-6, Butabarbital 125-40-6D, Butabarbital,
 enantiomers and metabolites 145-13-1, Pregnenolone 145-13-1D,
 Pregnenolone, enantiomers and metabolites 151-83-7, Methohexital
 151-83-7D, Methohexital, enantiomers and metabolites 439-14-5, Diazepam
 439-14-5D, Diazepam, enantiomers and metabolites 485-49-4, Bicuculline
 485-49-4D, Bicuculline, enantiomers and metabolites 516-54-1
 516-54-1D, enantiomers and metabolites 516-55-2, Allopregnanolone
 516-55-2D, Allopregnanolone, enantiomers and metabolites 567-03-3,
 Tetrahydrodeoxycorticosterone 567-03-3D, Tetrahydrodeoxycorticosterone,
 enantiomers and metabolites 604-75-1, Oxazepam 604-75-1D, Oxazepam,
 enantiomers and metabolites 846-49-1, Lorazepam 846-49-1D, Lorazepam,
 enantiomers and metabolites 846-50-4, Temazepam 846-50-4D, Temazepam,
 enantiomers and metabolites 1005-93-2, Etbicuphat 1005-93-2D,
 enantiomers and metabolites 1134-47-0, .+-.Baclofen 1134-47-0D,
 .+-.Baclofen, enantiomers and metabolites 1449-89-4, Mebicuphat
 1449-89-4D, enantiomers and metabolites 1622-62-4, Flunitrazepam
 1622-62-4D, Flunitrazepam, enantiomers and metabolites 2078-54-8,
 Propofol 2078-54-8D, Propofol, enantiomers and metabolites 2955-38-6,
 Prazepam 2955-38-6D, Prazepam, enantiomers and metabolites 3289-22-3,
 Flucybene 3289-22-3D, enantiomers and metabolites 4406-37-5,
 Pregnanolone 4406-37-5D, Pregnanolone, enantiomers and metabolites
 17617-23-1, Flurazepam 17617-23-1D, Flurazepam, enantiomers and
 metabolites 17617-45-7, Picrotoxinin 17617-45-7D, Picrotoxinin,
 enantiomers and metabolites 21416-53-5, Picrotoxin 21416-53-5D,
 Picrotoxin, enantiomers and metabolites 23092-17-3, Halazepam
 23092-17-3D, Halazepam, enantiomers and metabolites 23930-19-0
 23930-19-0D, enantiomers and metabolites 28911-01-5, Triazolam
 28911-01-5D, Triazolam, enantiomers and metabolites 28981-97-7,
 Alprazolam 28981-97-7D, Alprazolam, enantiomers and metabolites
 29617-43-4 29617-43-4D, enantiomers and metabolites 29975-16-4,
 Estazolam 29975-16-4D, Estazolam, enantiomers and metabolites
 33125-97-2, Etomidate 33125-97-2D, Etomidate, enantiomers and
 metabolites 34985-87-0, Chlorazepam 34985-87-0D, Chlorazepam,
 enantiomers and metabolites 36104-80-0, Camazepam 36104-80-0D,
 Camazepam, enantiomers and metabolites 36735-22-5, Quazepam
 36735-22-5D, Quazepam, enantiomers and metabolites 43200-80-2,
 Zopiclone
 43200-80-2D, Zopiclone, enantiomers and metabolites 51052-72-3,
 Isobicyphat 51052-72-3D, enantiomers and metabolites 51486-74-9,
 Propylbicyphat 51486-74-9D, enantiomers and metabolites 52463-83-9,
 Pinazepam 52463-83-9D, Pinazepam, enantiomers and metabolites
 53813-83-5, Suriclone 53813-83-5D, Suriclone, enantiomers and
 metabolites 57109-90-7, Chlorazepate 57109-90-7D, Chlorazepate,
 enantiomers and metabolites 59467-70-8, Midazolam 59467-70-8D,
 Midazolam, enantiomers and metabolites 109370-34-5, Avermectin B
 109370-34-5D, Avermectin B, enantiomers and metabolites 117705-18-7
 117705-18-7D, enantiomers and metabolites 133737-32-3, Pagoclone
 133737-32-3D, Pagoclone, enantiomers and metabolites 133737-48-1
 133737-48-1D, enantiomers and metabolites 153046-19-6 153046-19-6D,

enantiomers and metabolites 224790-70-9, Cloflubicyne 224790-70-9D,
Cloflubicyne, enantiomers and metabolites 224790-71-0, Etbicythionat
224790-71-0D, Etbicythionat, enantiomers and metabolites
RL: BAC (Biological Activity or effector, except adverse); THU
(Therapeutic use); BIOL (Biological study); USES (Uses)
(GABA receptor modulators for alleviating **stuttering**
)

L10 ANSWER 2 OF 45 TOXIT
ACCESSION NUMBER: 2001:0118 TOXLIT
DOCUMENT NUMBER: C141757Z
TITLE: Methods and compositions using **GABA** receptor
modulators for alleviating **stuttering**.
AUTHOR: Murphy JJ; D'orlando KJ
SOURCE: (L. O.). PCT Int. Appl. PATENT NO. 018670 02/08/2001
(Interneuron Pharmaceuticals, Inc.).
COTED: PIXXD2.
PUB. COUNTRY: UNITED STATES
DOCUMENT TYPE: Patent
FILE SEGMENT: C141757Z
LANGUAGE: English
OTHER SOURCE: C141757Z
ENTRY MONTH: 2001

AB Methods of treating **stuttering** include treating people with
.gamma.-aminobutyric acid (**GABA**) receptor modulators, including
cyclopyrrolones. A second active agent may be used with **GABA**
receptor modulators. Active enantiomers, active metabolites, and
pharmaceutically acceptable salts of **GABA** receptor modulators,
including cyclopyrrolones, are acceptable components of the compns. The
cyclopyrrolone class of modulators includes pagoclone, suriclone,
zopiclone, 2-(7-chloro-2-naphthyridin-1,8-yl)-3-(5-methyl-2-
oxohexyl)isoindolin-1-one,
2-(7-chloro-2-naphthyridin-1,8-yl)isoindolin-1-
yl-4-acetamidobutylamine, and
2-(7-chloro-1,8-naphthyridin-2-yl)-3-(5-methyl-
5-hydroxy-2-oxohexyl)-1-isoindolinone.
TI Methods and compositions using **GABA** receptor modulators for
alleviating **stuttering**.
AB Methods of treating **stuttering** include treating people with
.gamma.-aminobutyric acid (**GABA**) receptor modulators, including
cyclopyrrolones. A second active agent may be used with **GABA**
receptor modulators. Active enantiomers, active metabolites, and
pharmaceutically acceptable salts of **GABA** receptor modulators,
including cyclopyrrolones, are acceptable components of the compns. The
cyclopyrrolone class of modulators includes pagoclone, suriclone,
zopiclone, 2-(7-chloro-2-naphthyridin-1,8-yl)-3-(5-methyl-2-
oxohexyl)isoindolin-1-one, . . .
ST **GABA** receptor modulator for **stuttering** treatment;
cyclopyrrolone compounds for **stuttering** treatment

L10 ANSWER 3 OF 45 FULL
ACCESSION NUMBER: 01:4769 USPATFULL
TITLE: Anidinylamino heterocycle compounds useful as
alpha-2 adrenoceptor agonists
INVENTOR(S): Murphy, Thomas Lee, Norwich, NY, United States
Dolan, Sophie Eva, Maineville, OH, United States
Murray, Raymond Todd, Pleasant Plain, OH, United States
Weldon, Russell James, Fairfield, OH, United States
Bel, William Lee, Hamilton, OH, United States

PATENT ASSIGNMENT(S): es, Jeffrey Joseph, Hamilton, OH, United States
e Procter & Gamble Company, Cincinnati, OH, United
ates (U.S. corporation)

| | NUMBER | DATE |
|---------------------|--------------|--------------------------|
| PATENT INFORMATION: | 6172095 | 20010109 |
| | 9823591 | 19980604 |
| APPLICATION INFO.: | 1999-308790 | 19990809 (9) |
| | 1997-US20550 | 19971121 |
| | | 19990809 PCT 371 date |
| | | 19990809 PCT 102(e) date |

| | NUMBER | DATE |
|-----------------------|---------------------------------|---------------|
| PRIORITY INFORMATION: | 1996-31756 | 19961125 (60) |
| DOCUMENT TYPE: | Patent | |
| PRIMARY EXAMINER: | Man, D. Margaret | |
| LEGAL REPRESENTATIVE: | lerman, James C.; Roof, Carl J. | |
| NUMBER OF CLAIMS: | | |
| EXEMPLARY CLAIM: | | |

LINE COUNT: 05

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB This invention involves compounds having the structure (I) as described in the claims, and enantiomers, optical isomers, stereoisomers, diastereomers, tautomers, addition salts, biohydrolyzable amides and esters thereof, as well as pharmaceutical compositions comprising such novel compounds. The invention also relates to the use of such

compounds
for preventing or treating disorders modulated by alpha-2
adrenoceptors.
##SYN##

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD to respiratory challenges such as inhaled citric acid. (See, e.g., Callaway, G. R. King, "Effects of Inhaled .alpha.2-Adrenoceptor and GABA_A Receptor Agonists on Citric Acid-Induced Cough and Tidal Volume Changes in Guinea Pigs", European Journal of Pharmacology, Vol. 220 (1992), The effectiveness of other alpha-2 agonists in the management of neurologic disorders has been demonstrated, including attention-deficit hyperactive disorder and Tourette's syndrome (See, e.g., Chappell P., M. Riddle, L. Scalap, K. F. Schult, R. Schultz, A. Amsten, J. Leckman & D. Cohen, "Guanfacine treatment of comorbid attention-deficit hyperactivity disorder and Tourette's syndrome: preliminary clinical experience", Journal of American Academy of Child and Adolescent Psychiatry, Vol. 34 (1995), pp. 1140-1146), cognitive disorders. . . .

L10 ANSWER 0145 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.DUPLICATE 1

ACCESSION NUMBER: 001 0362 EMBASE Alert (EMBAL)

TITLE: treatment in Tourette syndrome: A double-blind, placebo-controlled, crossover trial.

AUTHOR: i.S.; Wendlandt J.; Krieger M.; Giuliano J.

CORPORATE J. Singer, Johns Hopkins Hospital, Harvey 811, 600 N.

110 Street, Baltimore, MD 21287-8811, United States.
info@jhmi.edu

SOURCE: gy, (13 Mar 2001) 56/5 (599-604). Refs: 32.

NEURA ISSN: 0028-3878

PUB. COUNTRY: United States

DOCUMENT TYPE: Article

LANGUAGE: English

SUMMARY LANGUAGE: English

AB Object: To investigate the effectiveness of baclofen for the treatment of tics in children with **Tourette** syndrome (TS). Background: Baclofen contains both .gamma.-aminobutyric acid (**GABA**) and gamma-aminobutyric acid moieties, was suggested in an open-label protocol to be an effective treatment for TS. This is a double-blind, placebo-controlled study to investigate this medication in children with TS. Methods: Subjects received, in a randomized sequence, 4-week medication cycles of baclofen (20 mg three times daily) and placebo with

a 2-week placebo washout period between the cycles. Outcome measures included the Clinical Global Impression (CGI) scale, and the Yale Global Tic Severity Scale (YGTS), the latter including subscales for total tics and overall impairment. Measures were assessed at baseline and on days

28, 42, and 56 of the study. Results: Ten children (seven boys and three girls) with TS participated. Nine subjects completed the protocol; one dropped out for psychosocial reasons. No major side effects were reported. The mean change in CGI score (-0.9) after 4 weeks of baclofen treatment as compared with placebo treatment showed a

significant improvement (95% CI, -1.7 to -0.1; $p = 0.04$). All subjects showed some amelioration of total YGTS score during baclofen treatment. The mean change in total YGTS score (-14.7) approached significance (95% CI, -30.3

to 0.0). Examination of differences between baclofen and placebo

treatment expressed as a percent change from baseline showed that baclofen had a statistically significant effect on both outcome measures. Subscale scores on YGTS showed that the reduction in total tic scores was primarily due to a reduction in the impairment score rather than a decrease in tic frequency. Conclusions: Children with TS may benefit from

treatment with baclofen, although improvements may be related to factors other than tics. Further studies directly comparing baclofen against other tic-suppressing agents are recommended.

AB Object: To investigate the effectiveness of baclofen for the treatment of tics in children with **Tourette** syndrome (TS). Background: Baclofen contains both .gamma.-aminobutyric acid (**GABA**) and gamma-aminobutyric acid moieties, was suggested in an open-label protocol to be an effective treatment for TS. This is a double-blind, . . .

L10 ANSWER: CAPLUS COPYRIGHT 2001 ACS DUPLICATE 2

ACCESSION: 2000:688058 CAPLUS

DOCUMENT NUMBER: 133:261534

TITLE: Treatment of post-traumatic stress disorder, obsessive-compulsive disorder and related neuropsychiatric disorders

INVENTOR(S): Fogel, Barry S.

PATENT ASSIGNEE: Synchroneuron, Llc, USA

SOURCE: PCT Int. Appl., 58 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY APPLICATION NUMBER: 1

PATENT INFORMATION:

| PATENT | KIND | DATE | APPLICATION NO. | DATE |
|--|-------|----------|--|---------------|
| ----- | ----- | ----- | ----- | ----- |
| WO 20000928 | A2 | 20000928 | WO 2000-US7119 | 20000317 |
| WO 20001228 | A3 | 20001228 | | |
| W. CH, CN, JP, MX, NZ | | | | |
| R. CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, | | | | |
| PRIORITY A | | | US 1999-273036 | 19990319 |
| AB The p | | | ation describes a novel treatment for neuropsychiatric | |
| disor | | | ding anxiety disorders, mood disorders, psychotic | |
| disor | | | form disorders, and neuropsychiatric symptoms resulting | |
| from | | | sorders. The treatment of the present invention utilizes | |
| any a | | | multaneously act as NMDA-type glutamate receptor | |
| antago | | | GABA-A receptor agonists. Preferably these two | |
| activities | | | | |
| are c | | | ic of a single agent, for example acamprosate (calcium | |
| N-ace | | | inate). Alternatively, sep. agents having these | |
| activ | | | e combined as a compd. or mixt. and thereby administered | |
| toget | | | nvention also provides for a third agent that acts as a | |
| non-c | | | MDA-receptor blocking agent or ion channel blocker, that | |
| augme | | | ect of the primary treatment. A particularly preferred | |
| ion c | | | king agent is magnesium. | |
| IT Brain, | | | | |
| (G | | | Tourette syndrome; post-traumatic stress | |
| di | | | essive-compulsive disorder and related neuropsychiatric | |
| di | | | atment with NMDA glutamate antagonists and GABA | |
| A | | | | |
| L10 ANSWER | | | USPATFULL | |
| ACCESSION | | | 2000:171042 USPATFULL | |
| TITLE: | | | 2-imidazolinyllaminoindole compounds useful as alpha-2 | |
| | | | adrenoceptor agonists | |
| INVENTOR(S) | | | Henry, Raymond Todd, Pleasant Plain, OH, United States | |
| | | | Sheldon, Russell James, Fairfield, OH, United States | |
| | | | Seibel, William Lee, Hamilton, OH, United States | |
| PATENT ASS | | | The Procter & Gamble Company, Cincinnati, OH, United | |
| SEE(S) | | | States (U.S. corporation) | |
| | | | NUMBER | DATE |
| | | | ----- | ----- |
| PATENT INFO | | | US 6162818 | 20001219 |
| MATION | | | | |
| APPLICATION | | | US 1999-290731 | 19990413 (9) |
| INFO.: | | | | |
| RELATED AP | | | Continuation of Ser. No. WO 1997-US20801, filed on 21 | |
| N. INF | | | Nov 1997 | |
| | | | NUMBER | DATE |
| | | | ----- | ----- |
| PRIORITY II | | | US 1996-31777 | 19961111 (60) |
| FORMATI | | | | |
| DOCUMENT T | | | Utility | |
| E: | | | | |
| PRIMARY EX | | | McKane, Joseph K. | |
| MINER: | | | | |
| ASSISTANT | | | Oswecki, Jane C. | |
| : AMINER: | | | | |
| LEGAL REPR | | | Bott, Cynthia M.; Kellerman, James C.; Clark, Karen F. | |
| ENTATI | | | | |
| : : | | | | |
| NUMBER OF | | | 42 | |
| (AIMS: | | | | |
| EXEMPLARY | | | 1 | |
| (AIM: | | | | |
| LINE COUNT: | | | 2524 | |
| CAS INDEX | | | IS AVAILABLE FOR THIS PATENT. | |
| AB This invent | | | involves compounds having the following structure: | |
| | | | ##S.1## where: a) R.sub.1 is hydrogen; or alkyl; bond (a) is a | |
| single | | | | |
| | | | or a double bond; | |

b) F.sub.2 and R.sub.3 are each independently selected from hydrogen; unsubstituted C.sub.1 -C.sub.3 alkanyl, alkenyl or alkynyl; cycloalkanyl, cycloalkenyl; unsubstituted C.sub.1 -C.sub.3 alkylthio or alkoxy; hydroxy; thio; nitro; cyano; amino; C.sub.1 -C.sub.3 alkylamino or C.sub.1 -C.sub.3 dialkylamino and halo;

c) F.sub.4, R.sub.5 and R.sub.6 are each independently selected from hydrogen; unsubstituted C.sub.1 -C.sub.3 alkanyl, alkenyl or alkynyl; cycloalkanyl, cycloalkenyl; unsubstituted C.sub.1 -C.sub.3 alkylthio or alkoxy; hydroxy; thio; nitro; cyano; amino; C.sub.1 -C.sub.3 alkylamino or C.sub.1 -C.sub.3 dialkylamino; halo; and 2-imidazolinylamino; and wherein one and only one of R.sub.4, R.sub.5 and R.sub.6 is 2-imidazolinylamino;

d) R.sub.7 is selected from hydrogen; unsubstituted C.sub.1 -C.sub.3 alkanyl, alkenyl or alkynyl; cycloalkanyl, cycloalkenyl; unsubstituted C.sub.1 -C.sub.3 alkylthio or alkoxy; hydroxy; thio; nitro; cyano; amino; C.sub.1 -C.sub.3 alkylamino or C.sub.1 -C.sub.3 dialkylamino and halo;

e) the compound is not 4-(2-imidazolinylamino)indole;

enantiomers, optical isomers, stereoisomers, diastereomers, tautomers, addition salts, biohydrolyzable amides and esters thereof, and pharmaceutical compositions comprising such novel compounds. The invention also relates to the use of such compounds for treating disorders mediated by alpha-2 adrenoceptors.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD to respiratory challenges such as inhaled citric acid. (See, e.g., Callaway, J. & R. King, "Effects of Inhaled .alpha.2-Adrenoceptor and GABA.sub.B Receptor Agonists on Citric Acid-Induced Cough and Tidal Volume Changes in Guinea Pigs", European Journal of Pharmacology, Vol. 220 (1992), The effectiveness of other alpha-2 agonists in the management of neurologic disorders has been demonstrated including attention-deficit hyperactive disorder and Tourette's syndrome (See, e.g., Chappell P., M. Riddle, L. Scamill, K. Lynch, R. Schultz, A. Arnsten, J. Leckman & D. Cohen, "Guanfacine treatment of comorbid attention-deficit hyperactivity disorder and Tourette's syndrome: preliminary clinical experience", Journal of American Academy of Child and Adolescent Psychiatry, Vol. 34 (1995), pp. 1140-1146), cognitive disorders. . . .

L10 ANSWER 7 OF 45 USPATFULL

ACCESSION NUMBER: 2000:137814 USPATFULL

TITLE: Allelic polygene diagnosis of reward deficiency syndrome and treatment

INVENTOR(S): Blum, Kenneth, San Antonio, TX, United States

PATENT ASSIGNEE(S): City of Hope National Medical Center, Duarte, CA, United States (U.S. corporation)
The University of Texas System AMD Board of Regents, Austin, TX, United States (U.S. corporation)

| | NUMBER | DATE |
|---------------------|---------------|--------------|
| PATENT INFORMATION: | US 6132724 | 20001017 |
| APPLICATION INFO.: | US 1998-69886 | 19980429 (9) |
| DOCUMENT TYPE: | Utility | |

PRIMARY EXAMINER: Witz, Jean C.
LEGAL REPRESENTATIVE: Hodgins, Daniel S.
NUMBER OF CLAIMS: 9
EXEMPLARY CLAIM: 1
NUMBER OF DRAWINGS: 8 Drawing Figure(s); 8 Drawing Page(s)
LINE COUNT: 20845

AB Enhancement of attentional processing is attained by administration of an endorphinase inhibitor or enkephalinase inhibitor and optionally, a dopamine precursor, or a serotonin precursor, a GABA precursor, or an endorphin or enkephalinase releaser, or certain herbal compounds including Rhodiola rosea extract (Pharmaline) and/or Huperzine. These components promote restoration of normal neurotransmitter function and the components combined enhance the release of dopamine at the nucleus accumbens and are non-addictive. Use of the dopamine precursors L-phenylalanine, or L-Tyrosine, the enkephalinase inhibitor D-phenylalanine, and/or the serotonin precursor -hydroxytryptophan and

a natural acetylcholinesterase inhibitor and chromium salts (i.e. picolinate, nicotinate, etc.) is especially preferred, but not limited to assist in relieving symptoms associated with brain phenylalanine deficiency.

DETD a number of receptors are involved in various types of substance abuse including dopamine, serotonin, cannabinoid, nitric oxide, nicotinic muscarinic, GABA, and others. The diagnosis of Tourette's syndrome is dependent upon the presence of motor tics, and dopamine plays a major role in the regulation of muscle. .

L10 ANSWER 8 OF 45 USPATFULL

ACCESSION NUMBER: 2000:121514 USPATFULL
TITLE: 6-(2-imidazolinyllamino)quinoxaline compounds useful as alpha-2 adrenoceptor agonists
INVENTOR(S): Maurer, Peter J., Cincinnati, OH, United States
Henry, Raymond T., Pleasant Plain, OH, United States
Sheldon, Russell James, Fairfield, OH, United States
PATENT ASSIGNEE(S): The Procter & Gamble Company, Cincinnati, OH, United States (U.S. corporation)

| | NUMBER | DATE |
|-----------------------|--|--------------|
| PATENT INFORMATION: | US 6117871 | 20000912 |
| APPLICATION INFO.: | US 1996-755941 | 19961125 (8) |
| RELATED APPLN. INFO.: | Continuation-in-part of Ser. No. US 1995-496707, filed on 29 Jun 1995, now abandoned which is a continuation-in-part of Ser. No. US 1993-169785, filed on 17 Dec 1993, now abandoned | |
| DOCUMENT TYPE: | Utility | |
| PRIMARY EXAMINER: | Fay, Zohreh | |
| LEGAL REPRESENTATIVE: | Bott, Cynthia M.; Kellerman, James C.; Suter, David L. | |
| NUMBER OF CLAIMS: | 18 | |
| EXEMPLARY CLAIM: | 1 | |
| LINE COUNT: | 1432 | |

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB The subject invention relates to methods of treating alpha-2 adrenoceptor modulated disorders, comprising administration, to a mammal in need of such treatment, of a safe and effective amount of a compound having the following structure: ##STR1## wherein: (a) R is unsubstituted C.sub.1 -C.sub.3 alkanyl or alkenyl; and

(b) is selected from hydrogen; unsubstituted C.sub.1 -C.sub.3 alkanyl or phenyl; unsubstituted C.sub.1 -C.sub.3 alkylthio or alkoxy; hydroxy; thio; and halo.

The subject invention also relates compounds and compositions for preventing or treating of disorders modulated by alpha-2 adrenoceptors.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

DETD . . . to respiratory challenges such as inhaled citric acid. (See, e.g., Callaway, J. & R. King, "Effects of Inhaled .alpha.2-Adrenoceptor and GABA.sub.3 Receptor Agonists on Citric Acid-Induced Cough and Tidal Volume Changes in Guinea Pigs", European Journal of Pharmacology Vol. 220 (1992), . . . The effectiveness of other alpha-2 agonists in the management of neurologic disorders has been demonstrated, including attention-deficit hyperactive disorder and Tourette's syndrome (See, e.g., Chappell P., M. Riddle, L. Scarf, K. Lynch, R. Schultz, A. Arnsten, J. Leckman & D. Cohen, "Guanfacine treatment of comorbid attention-deficit hyperactivity disorder and Tourette's syndrome: preliminary clinical experience", Journal of American Academy of Child and Adolescent Psychiatry, Vol. 34 (1995), pp. 1140-1146), cognitive disorders. . .

L10 ANSWER OF USPATFULL

ACCESSION NUMBER: 2000:113979 USPATFULL

TITLE: 2-imidazolinyaminobenzoxazole compounds useful as alpha-2 adrenoceptor agonists

INVENTOR(S): Henry, Raymond Todd, Pleasant Plain, OH, United States
Sheldon, Russell James, Fairfield, OH, United States
Seibel, William Lee, Hamilton, OH, United States

PATENT ASSIGNEE(S): The Procter & Gamble Company, Cincinnati, OH, United States (U.S. corporation)

| | NUMBER | DATE |
|---------------------|-----------------|--------------------------|
| PATENT INFORMATION: | US 6110952 | 20000829 |
| | WO 9823611 | 19980604 |
| APPLICATION INFO.: | US 1999-308792 | 19990809 (9) |
| | WO 1997-US20803 | 19971121 |
| | | 19990809 PCT 371 date |
| | | 19990809 PCT 102(e) date |

| | NUMBER | DATE |
|-----------------------|------------------------------------|---------------|
| PRIORITY INFORMATION: | US 1996-31787 | 19961125 (60) |
| DOCUMENT TYPE: | Utility | |
| PRIMARY EXAMINER: | McKane, Joseph | |
| ASSISTANT EXAMINER: | Wright, Sonya N | |
| LEGAL REPRESENTATIVE: | Kellerman, James C.; Roof, Carl J. | |
| NUMBER OF PAGES: | 42 | |
| EXEMPLARY FIGURES: | 1 | |
| LINE COUNT: | 1879 | |

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB This invention relates to compounds of formula I, (2-imidazolinyaminobenzoxazoles. The compounds have been found to be alpha-2 adrenoceptor agonists and are useful for treatment of disorders modulated by alpha-2 adrenoceptors.

CAS INDEXED AVAILABLE FOR THIS PATENT.

DETD respiratory challenges such as inhaled citric acid. (See, e.g., Callahan, J. & R. King, "Effects of Inhaled .alpha.2-Adrenoceptor and .alpha.2-Adrenoceptor Agonists on Citric Acid-Induced Cough and Airway Changes in Guinea Pigs", European Journal of Pharmacology, Vol. 220 (1992), The effectiveness of other alpha-2 agonists in the management of neurologic disorders has been demonstrated, including attention-deficit hyperactive disorder and Tourette's syndrome (See, e.g., Chappell P., M. Riddle, L. Scahill, R. Schultz, A. Arnsten, J. Leckman & D. Cohen, "Guinea Pig Treatment of comorbid attention-deficit hyperactivity disorder and Tourette's syndrome: preliminary clinical experience", Journal of American Academy of Child and Adolescent Psychiatry, Vol. 34 (1995), pp. 1140-1146), cognitive disorders. . . .

L10 ANSWER OF USPATFULL

ACCESSION NO. 2000:54156 USPATFULL

TITLE: Methods of treating tardive dyskinesia and other movement disorders using NMDA receptor antagonists

INVENTOR(S) Fogel, Barry S., Waban, MA, United States
PATENT ASSIGNEE(S) Synchroneuron, LLC, Waban, MA, United States (U.S. corporation)

| | NUMBER | DATE |
|----------------------|--|--------------|
| ----- | | |
| PATENT INFO | US 6057373 | 20000502 |
| APPLICATION NO. | US 1999-224829 | 19990104 (9) |
| RELATED APPL. | Continuation-in-part of Ser. No. US 1997-861801, filed on 22 May 1997, now patented, Pat. No. US 5866585 | |
| DOCUMENT TYPE | Utility | |
| PRIMARY EXAMINER | MacMillan, Keith D. | |
| ASSISTANT EXAMINER | Kim, Vickie Y. | |
| LEGAL REPRESENTATIVE | Choate, Hall & Stewart; Pasternack, Sam | |
| NUMBER OF PAGES | 52 | |
| EXEMPLARY | 1 | |
| LINE COUNT | 1728 | |

CAS INDEXED AVAILABLE FOR THIS PATENT.

AB The present invention describes a novel treatment for movement disorders, including tardive dyskinesia and tardive dystonia, and focal dyskinesias due to neuroleptics, including blepharospasm, Meige syndrome, and occupational dystonias. The treatment of the present invention utilizes agents that act as NMDA-type glutamate receptor antagonists. The invention also involves the use of an ion channel blocking agent to augment the therapeutic action of the drug treatments described. Particularly preferred ion channel blocking agent is mag.

CAS INDEXED AVAILABLE FOR THIS PATENT.

SUMMARY And neuroleptic treatment, clonazepam, a benzodiazepine with GABA-A agonistic actions, has some efficacy in the treatment of Tourette's syndrome (Steingard et al., J. Am Acad Child Psychiatry, March-April, 33:394-9, 1994). Sedation and ataxia are the dosage of. . . .

DETD As, GABA-A agonists alone are not particularly potent in the treatment of tics. Therefore, NMDA antagonism is likely a necessary component of the therapeutic. . . . of memantine is more important

than the agonism. Evidence disclosed herein suggests that

mo: ers, such as tics and **Tourette's**, will respond
 in: lar to tardive movement disorders to drug therapies
 ha: gonist activity.

L10 ANSW: EPIDS COPYRIGHT 2001 DERWENT INFORMATION LTD
 ACCESSION 001-071285 [08] WPIDS
 DOC. NO. (2001-019987
 TITLE: Identifying genes of interest and relevance to
 neurological disorders or dysfunctions such as
 Parkinson's disease involves use of biological array
 including all genes associated with neurotransmitter
 molecules.
 DERWENT C: 04 D16
 INVENTOR(REEK, M J; LAFORGE, K S; SPANGLER, R
 PATENT AS. UYRQ) UNIV ROCKEFELLER
 COUNTRY C 3
 PATENT IN: IC

| PATEL | ATE | WEEK | LA | PG |
|----------------|--------|---|----|----|
| WO 2001-071285 | 200108 | (200108)* EN | 76 | |
| RE | BE | DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ | | |
| | DE | SE SL SZ TZ UG ZW | | |
| | AT | AT AU AZ BA BB BG BR BY CA CH CN CR CU CZ DE DK DM DZ | | |
| | ES | GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK | | |
| | LV | LV MA MD MG MK MN MW MX MZ NO NZ PL PT RO RU SD SE SG | | |
| | TM | TM TR TT TZ UA UG US UZ VN YU ZA ZW | | |

APPLICATION AI

| PATEL | APPLICATION | DATE |
|----------------|-----------------|----------|
| WO 2000-071285 | WO 2000-US16706 | 20000616 |

PRIORITY A. P. S 1999-334113 19990616
 AN 2001- 5 WPIDS
 AB WO 2001-071285 B: 20010207
 NOVEL Ic ing genetic predisposition to, susceptibility to
 devel nt aracteristics of, or persistence of physiological or
 path a se to, a neurotransmitter factor-related condition
 (NFC p Identifying genetic polymorphisms in neurotransmitter
 genes c ith NFC, using a multiple biological sample array, is
 new.
 CLAIM ILL RIPTION - An INDEPENDENT CLAIM is also included for
 makin) logical chip plate (I), comprising attaching a wafer
 comp c urface, a set of probe arrays (II) each comprising a
 coll n c es, at least two of which, are different, and arranged
 in s ll ed and physically addressable manner, to a body
 comp c f defined spaces. (II) is selected from a family of
 neur a enes known to be affected by exposure to addictive
 agent / hol. The probes are selected from a family of
 neuro m enes known to be involved in a neurological disorder or
 dysfu ion, se to strain, stress, gastrointestinal function,
 immune
 func c live function or signal transduction. The method
 comp g a material resistant to the flow of a liquid, to
 surr c arrays, creating test wells.
 iden c ing a biological chip plate which is useful for
 c c predisposition to, susceptibility to development of,

characterized by, or persistence of physiological or pathological
 response to genetic polymorphisms or gene expression in several
 neurological disorders, preferably opioid system genes, associated with
 the disorders. Such arrays are useful in prognosis of neurological
 disorders such as schizophrenia, Tourette syndrome, drug abuse,
 attention deficit disorder, anxiety, depression obsessive-compulsive disorder,
 stroke, response to pain, hypertension, vascular disorders,
 migraines, Alzheimer's disease, aggressive behavior, premenstrual
 syndrome, neuropathy, suppression of alcohol intake, and
 Parkinson's disease. (All claimed). A DNA array can determine the
 presence of a pathogenic organism based on characteristic DNA
 sequences. The array provides a multifunction analytical
 capability as in the study of RNA abnormalities or polymorphisms, and
 part of the nucleotide polymorphisms. It will yield quantitative
 information on physiological and/or pathological condition of the
 test subject. Analysis of the DNA of the subject will provide
 information on the subject genotype and corresponding genetic
 predisposition. The methods allow many tests to be set up and processed
 together. They allow much higher throughput of test samples,
 these methods improve the efficiency of performing assays on biological
 chips. Biological and genetic conditions can be identified using
 the array. This is rapid and inexpensive.
 Dwg.
 TECH.
 adenosine triphosphatase (ATPase), dopamine D1 receptor, dopamine D2 receptor,
 and acetylcholine receptor genes such as -E and subtypes,
 GABA (gamma-aminobutyric acid) receptor (muscarinic) genes,
 glutamate receptor genes, and NMDA (undefined) receptor genes and the
 genes are associated with. . . . as opiate, cocaine,
 neurotensin, addiction. The neurotransmitter genes are involved in a
 hereditary disorder such as addiction, schizophrenia, **Tourette**
 syndrome, attention deficit disorder, anxiety, depression
 obsessive-compulsive disorder, stroke, obesity, response to pain,
 hypertension, vascular disorders, migraine, nausea,

L10 ANSWER 2
 ACCESSION NUMBER 000-411597 [35] WPIDS
 CROSS REFERENCE 009-444313 [37]
 DOC. NO. 000-124615
 TITLE: Treating movement disorders using agents which increase
 ABA-A neurotransmission and decrease NMDA-glutamate
 neurotransmission.

DERWENT CLASSIFICATION B06
 INVENTOR(S) GEL, B S
 PATENT AGENT (S) (INC-N) SYNCHRONEURON LLC
 COUNTRY OF ORIGIN
 PATENT IN AT

| PATENT | FILE | WEEK | LA | PG |
|---------------|--|------|----|----|
| WO 2000/0525 | 00525 (200035)* | EN | 61 | |
| | DK ES FI FR GB GR IE IT LU MC NL PT SE | | | |
| | P MX NZ | | | |
| AU 2000/00605 | 00605 (200042) | | | |

APPLICATION

| PATENT NO. | APPLICATION | DATE |
|----------------|-----------------|----------|
| WO 2000-017343 | WO 1999-US27343 | 19991118 |
| AU 2000-17347 | AU 2000-17347 | 19991118 |

FILING DE

| PATENT NO. | PATENT NO. |
|---------------|--------------|
| AU 2000-17347 | WO 200028999 |

PRIORITY 1998-193892 19981118

AN 2000 EPIDS

CR 1999

AB WO 20000905

NOVE for treating movement disorders comprises

administered

an agent which decreases GABA-A neurotransmission and decreases neurotransmission to a patient with a movement disorder. DESCRIPTION - INDEPENDENT CLAIMS are included for: for treating movement disorders which comprises agent (I) that acts as a GABA-A receptor agonist and a which acts as a NMDA-type glutamate receptor antagonist and them to the patient; for assessing risk of developing a neuroleptic or blocker-induced movement disorder which comprises and tests of total body magnesium status; for preventing neuroleptic or dopamine receptor movement disorders and for treating movement disorders which administering magnesium ions; and methods/compositions based upon various combinations of the

anti-dyskinesia. ACTION - NMDA Receptor antagonist; GABA-A agonist. to treat simple or multiple tics, **Tourette's** dystonias, blepharospasm and Meige syndrome. The disorders are related to **GABA** deficiency in the basal ganglia or to excitotoxicity (all claimed). The method may be used to treat dyskinesia and movement disorders induced by exposure to neuroleptic (psychotic) drugs.

AB

- An agent which decreases GABA-A neurotransmission and decreases neurotransmission to a patient with a movement disorder. ACTION - NMDA Receptor antagonist; GABA-A agonist. to treat simple or multiple tics, **Tourette's** dystonias, blepharospasm and Meige syndrome. The disorders are related to **GABA** deficiency in the basal ganglia or to excitotoxicity (all claimed). The method may be used to treat dyskinesia.

L10 ANSV

ACCESSION

TITLE:

PLEASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

04103 EMBASE

GABA deficiency syndrome: A biogenetic model for the

diagnosis and treatment of impulsive, addictive, and
 impulsive behaviors.
 AUTHOR: Miller D.; Braverman E.R.; Holder J.M.; Lubar J.F.; Monastera
 Miller D.; Lubar J.O.; Chen T.J.H.; Comings D.E.
 CORPORATE: Blum, Department of Biological Sciences, University
 North Texas, Denton, TX, United States
 SOURCE: Journal of Psychoactive Drugs, (2000) 32/SUPPL. (1-112).
 638
 ISSN: 0279-1072 CODEN: JPDRD3
 COUNTRY: United States
 DOCUMENT: General Review
 FILE SEGM: Human Genetics
 Clinical Biochemistry
 Psychiatry
 Drug Literature Index
 Drug Dependence, Alcohol Abuse and Alcoholism
 LANGUAGE: English
 SUMMARY L: English
 AB The system, and in particular the dopamine D(2) receptor,
 has been
 been
 inter limbic brain region induces 'reward' when dopamine
 (DA) from the neuron at the nucleus accumbens and interacts
 with D(2) receptor. 'The reward cascade' involves the release
 of serotonin at the hypothalamus stimulates enkephalin,
 which inhibits GABA at the substantia nigra, which in
 turn increases the amount of DA released at the nucleus accumbens or
 'reward'. It is well known that under normal conditions in the
 reward system maintain our normal drives. In fact, DA has become to be
 known as the 'reward molecule' and/or the 'antistress molecule.' When
 DA is released at the synapse, it stimulates a number of DA receptors
 (D1-D5). The literature suggests that when there is a
 dysfunction in the reward cascade, which could be caused by certain
 genetic factors (e.g., D(2) receptor polymorphism), especially in the DA system causing a
 hypoactive state, the brain of that person requires a DA fix to
 feel good. This leads to multiple drug-seeking behavior. This is so
 because cocaine, heroin, marijuana, nicotine, and glucose all
 cause neuronal release of brain DA, which could heal the
 abnormality. Certainly after ten years of study we could say with
 confidence that carriers of the DAD2 receptor A1 allele have compromised
 D(2) receptors. The lack of D2 receptors causes individuals to have
 a high risk for severe addictive, impulsive and compulsive behavioral
 problems such as severe alcoholism, cocaine, heroin, marijuana and
 nicotine addiction, bingeing, pathological gambling, sex addiction,
 ADHD, Tourette's syndrome, autism, chronic violence,
 post-traumatic stress disorder, schizoid/avoidant cluster, conduct
 disorder, and
 and case of multiple genes and environmental stimuli
 causing aberrant behaviors, Blum united this
 hypothesis under the rubric of a reward deficiency syndrome.
 AB 'The reward cascade' involves the release of serotonin, which in
 turn stimulates enkephalin, which in turn inhibits
 GABA at the substantia nigra, which in turn fine tunes the amount
 of DA released at the nucleus accumbens or 'reward'. . . . compulsive
 behaviors, such as severe alcoholism, cocaine, heroin,

mar: ... glucose bingeing, pathological gambling, sex
add: ... Syndrome, autism, chronic violence,
post: ... disorder, schizoid/avoidant cluster, conduct
disorder
and ... In order to explain the. . .

L10 ANS: ... COPYRIGHT 2001 BIOSIS
ACCESSION: ... 76 BIOSIS
DOCUMENT: ... 00054076

TITLE: ... deficiency syndrome: A biogenetic model for the
and treatment of impulsive, addictive, and
behaviors.

AUTHOR(S): ... Blum, Kenneth (1); Braverman, Eric R.; Holder, Jay M.;
... F.; Monastra, Vincent J.; Miller, David;

Lubar,

...; Chen, Thomas J. H.; Comings, David E.

CORPORATE: ... Department of Biological Sciences, University of North
... TX USA

SOURCE: ... Psychoactive Drugs, (November, 2000) Vol. 32,
... pp. i-iv, 1-112. print.
...-1072.

DOCUMENT: ... view

LANGUAGE:

SUMMARY I

AB The ... and in particular the dopamine D2 receptor, has
been ... mechanisms. The net effect of neurotransmitter
into ... brain region induces "reward" when dopamine
(DA) ... neuron at the nucleus accumbens and interacts
with ... "The reward cascade" involves the release of
sero ... at the hypothalamus stimulates enkephalin, which
in ... the substantia nigra, which in turn fine
tune ... released at the nucleus accumbens or "reward
site."

It ... under normal conditions in the reward site DA works
to ...elves. In fact, DA has become to be known as the
"ple ... the "antistress molecule." When DA is released
into ... stimulates a number a DA receptors (D1-D5) which
resu ... of well-being and stress reduction. A
cons ... suggests that when there is a dysfunction in
the ... , which could be caused by certain genetic
vari ... specially in the DA system causing a
hypo ... the brain of that person requires a DA fix to

feel

good ... multiple drug-seeking behavior. This is so
beca ... heroin, marijuana, nicotine, and glucose all
caus ... onal release of brain DA, which could heal the
abno ... only after ten years of study we could say with
conf ... of the DAD2 receptor A1 allele have compromised
D2 ... lack of D2 receptors causes individuals to have a
hig: ... dictive, impulsive and compulsive behavioral
pro: ... ere alcoholism, cocaine, heroin, marijuana and
nic ... eingeing, pathological gambling, sex addiction,
ADH ... , autism, chronic violence,
post ... der, schizoid/avoidant cluster, conduct

disorder

and

cas ... In order to explain the breakdown of the reward
(pl. ... ple genes and environmental stimuli
hyp ... ant aberrant behaviors, Blum united this
der the rubric of a reward deficiency syndrome.

AB. ... " involves the release of serotonin, which in

tur: stimulates enkephalin, which in turn inhibits
 GAB: gra, which in turn fine tunes the amount
 of: nucleus accumbens or "reward. . . compulsive
 beha: such as severe alcoholism, cocaine, heroin,
 mar: se, glucose bingeing, pathological gambling, sex
 add: e's Syndrome, autism, chronic violence,
 post: order, schizoid/avoidant cluster, conduct
 disorder
 and In order to explain the breakdown. . .

L10 ANS COPYRIGHT 2001 ACS DUPLICATE 3
 ACCESSIO: 464180 CAPLUS
 DOCUMENT: 111440
 TITLE: ds using agents simultaneously acting as
 -type glutamate receptor antagonists and GABA-A
 ptor agonists for treating tardive dyskinesia and
 r movement disorders
 INVENTOR: l, Barry S.
 PATENT A: throneuron, LLC, USA
 SOURCE: Int. Appl., 106 pp.
 I: PIXXD2
 DOCUMENT: nt
 LANGUAGE: sh
 FAMILY A:
 PATENT IN: I

| PATI | ATE | APPLICATION NO. | DATE |
|----------|---|---|----------|
| WO | 9990722 | WO 1999-US144 | 19990113 |
| WO | 9991202 | | |
| | JP, MX, NZ | | |
| | DE, DK, ES, EI, FR, GB, GR, IE, IT, LU, MC, NL, | | |
| US | 9990914 | US 1998-6641 | 19980113 |
| US | 0000502 | US 1999-224829 | 19990104 |
| AU | 9990802 | AU 1999-21041 | 19990113 |
| EP | 0001102 | EP 1999-901314 | 19990113 |
| | DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, | | |
| WO | 0000525 | WO 1999-US27343 | 19991118 |
| WO | 0000720 | | |
| | JP, MX, NZ | | |
| | DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, | | |
| | SE | | |
| PRIORITY | IFO. | US 1998-6641 | 19980113 |
| | | US 1998-193892 | 19981118 |
| | | US 1999-224829 | 19990104 |
| | | US 1997-861801 | 19970522 |
| | | WO 1999-US144 | 19990113 |
| AB | The | treatments for movement disorders, including | |
| | tard | tardive dyskinesia, tic disorders, Tourette's | |
| | sync | and other focal dystonias. The treatments use | |
| | agen | ly act as NMDA-type glutamate receptor | |
| | anta | a treatments of the invention use agents that | |
| | sim | DA-type glutamate receptor antagonists and GABA-A | |
| | rec | arably, these two activities are characteristic | |
| of | | | |
| | a s | prosate. Alternatively, sep. agents having | |
| these | | | |
| | acti | ed and administered together. The invention also | |

providing a third agent that can be used in combination with a treatment for movement disorders, that acts as a non-competitive NMDA-receptor blocker, an ion channel blocker that augments the effect of the primary treatment, particularly preferred ion channel blocking agent is

is magnesium. Alternatively, magnesium can be administered alone for prevention and treatment of movement disorders.

IT Brain disease, e.g., Huntington's disease, chorea, and dystonia; agents simultaneously acting as NMDA-type glutamate receptor antagonists and GABA-A receptor agonists (for treatment of movement disorders)

L10 ANSWER 1 OF 45

ACCESSION NUMBER: 19930103 TOXLIT

DOCUMENT NUMBER: CA 1440M

TITLE: Methods for treating agents simultaneously acting as NMDA-type glutamate receptor antagonists and GABA-A receptor

agonists

for treating tardive dyskinesia and other movement disorders

AUTHOR: Fournier, J.

SOURCE: (1) U.S. Pat. Int. Appl. PATENT NO. 9936064 07/22/1999 (S. Fournier, LLC).

CO. 1440M

PUB. COUNTRY: UNITED STATES

DOCUMENT NUMBER: Pat. 1440M

FILE SEQUENCE: CA 1440M

LANGUAGE: English

OTHER SOURCE: CA 1440M

ENTRY MONTH: 1993

AB The invention describes treatments for movement disorders, including tardive dyskinesia, tardive dystonia, tic disorders, **Tourette** syndrome, blepharospasm, and other focal dystonias. The treatments use agents that simultaneously act as NMDA-type glutamate receptor antagonists. Additionally, treatments of the invention use agents that simultaneously act as GABA-type glutamate receptor antagonists and GABA-A receptor agonists. Preferably, these two activities are characteristic of a single agent, e.g. acamprosate. Alternatively, separate agents having these activities can be combined and administered together. The invention also includes a third agent that can be used in combination with a treatment for movement disorders, that acts as a non-competitive NMDA-receptor blocker or ion channel blocker that augments the effect of the primary treatment. A particularly preferred ion channel blocker agent is magnesium. Alternatively, magnesium can be administered alone for prevention and treatment of movement disorders.

AB The invention describes treatments for movement disorders, including tardive dyskinesia, tardive dystonia, tic disorders, **Tourette** syndrome, blepharospasm, and other focal dystonias. The treatments use agents that simultaneously act as NMDA-type glutamate receptor antagonists. Additionally, treatments of the invention use agents that simultaneously act as GABA-type glutamate receptor antagonists and GABA-A receptor agonists. Preferably, these two activities are characteristic of a single agent, e.g. acamprosate. Alternatively, separate agents having these activities can be combined and administered together.

L10 ANSWER 7 OF 45

ACCESSION NUMBER: 19931 USPATFULL

TITLE: 2,6-dimethylamino heterocyclic compounds useful as dopamine receptor agonists

INVENTOR: Peter J., Cincinnati, OH, United States

PATENT APPLICANT(S): Jeffrey J., Hamilton, OH, United States
 William L., Hamilton, OH, United States
 Daniel P., Bloomington, IN, United States
 Russell James, Fairfield, OH, United States
 Raymond T., Pleasant Plain, OH, United States
 Foster & Gamble Company, Cincinnati, OH, United States
 (U.S. corporation)

NUMBER DATE

 PATENT INFORMATION: 1995 19991012
 APPLICATION INFO.: 56085 19961125 (8)
 RELATED P. INFO.: continuation-in-part of Ser. No. US 1995-478708, filed
 Jul 1995, now patented, Pat. No. US 5663189 which
 is a continuation-in-part of Ser. No. US 1993-86482,
 filed Jul 1993, now abandoned

DOCUMENT TYPE: Y
 PRIMARY INVENTOR: Lee, Jerome D.
 LEGAL REPRESENTATIVE: Mann, James C.; Roof, Carl J.; Suter, David L.
 NUMBER OF CLAIMS:
 EXEMPLAR CLAIM:
 LINE COUNT:

CAS INDEX IS AVAILABLE FOR THIS PATENT.
 ABSTRACT: The subject invention relates to compounds having the structure:
 #1## wherein n is an integer from 1 to about 3;

with (1) and Y are independently selected from O, S and CH.sub.2,
 and at least one of X and Z being O or S;

(2) is unsubstituted straight or branched chain alkanyl or alkanoxy
 having from 1 to 6 non-hydrogen atoms; and

(3) is selected from hydrogen, methyl, cyano, and halo;

pharmaceutical compositions containing such compounds; and the use of
 such compounds for the prevention or treatment of disorders modulated by
 alpha-2 adrenoceptors.

CAS INDEX IS AVAILABLE FOR THIS PATENT.
 DETD . . . to respiratory challenges such as inhaled citric acid. (See,
 e.g., Callaway, J. et al., "Effects of Inhaled .alpha.2-Adrenoceptor
 agonists on Citric Acid-Induced Cough
 and Tidal Volume in Guinea Pigs", European Journal of
 Pharmacology, Vol. 192, (1992), . . . The effectiveness of other
 alpha-2 agonists in the management of neurologic disorders has been
 demonstrated, including attention-deficit hyperactive disorder and
 Tourette's syndrome (e.g., Chappell P., M. Riddle, L.
 Schwartz, K. Lynch, et al., "Clonidine, A. Arnsten, J. Leckman & D. Cohen,
 "Clonidine treatment of comorbid attention-deficit hyperactivity
 disorder and Tourette's syndrome: preliminary clinical
 evidence", Journal of the American Academy of Child and Adolescent
 Psychiatry, Vol. 31, pp. 1140-1146), cognitive disorders. . .

L10 ANSWER 3 OF 45 US
 ACCESSION NUMBER: 92 USPATFULL
 TITLE: (azolinylamino)quinoline compounds useful as
 adrenoceptor agonists
 INVENTOR: Thomas Lee, Oxford, OH, United States

PATENT APPLICANT(S):
Daphne E., Maineville, OH, United States
Raymond T., Pleasant Plain, OH, United States
Russell James, Fairfield, OH, United States
Suter & Gamble Company, Cincinnati, OH, United States
(U.S. corporation)

INVENTOR DATE
1990 19990629
199118 19961125 (8)
Continuation-in-part of Ser. No. US 1995-496796, filed
1995, now patented, Pat. No. US 5716966

DOCUMENT TYPE:
PRIMARY INVENTOR:
LEGAL REPRESENTATIVE:
NUMBER OF CLAIMS:
EXEMPLAR CLAIM:

CAS INDEX IS AVAILABLE TO PATENT.
ABSTRACT: Invention involves the use of compounds having the
following structure wherein: (a) R is unsubstituted C.sub.1
-C.sub.3 alkanyl

(b) R is selected from hydrogen; unsubstituted C.sub.1 -C.sub.3

alkanyl; unsubstituted C.sub.1 -C.sub.3 alkylthio or alkoxy;

hydroxy; cyano; and

for preventing or treating disorders modulated by alpha-2

The subject invention involves novel compounds and compositions.

CAS INDEX IS AVAILABLE TO PATENT.
DETD: to respiratory challenges such as inhaled citric acid. (See,
e.g., Callaway, J. Pharmacol. Ther., 1978, 22, 1-10;
a. ABA.sub.B Reagents for the Measurement of Cough
a. Tidal Volume in Guinea Pigs", European Journal of
P. Pharmacology, Vol. 92, 1982, pp. 1-10. The effectiveness of other
a. alpha-2 agonists in the management of neurologic disorders has been
d. demonstrated, including attention-deficit hyperactive disorder and
T. Tourette's syndrome. e.g., Chappell P., M. Riddle, L.
S. H. H. K. Lynch, J. H. H. K. Lynch, J. H. H. K. Lynch, J. H. H. K. Lynch,
"Facial treatment of morbid attention-deficit hyperactivity
d. and Tourette's syndrome: preliminary clinical
e. experience", Journal of the American Academy of Child and Adolescent
P. Psychiatry, Vol. 24, 1985, pp. 1140-1146), cognitive disorders.

L10 ANSWER OF 45 US
ACCESSION NUMBER:
TITLE:
INVENTOR:
USPATFULL
Aminylamino heterocyclic compounds useful as
adrenoceptor agonists
Suter J., Cincinnati, OH, United States
Suter J., Hamilton, OH, United States
William L., Hamilton, OH, United States
Daniel P., Bloomington, OH, United States
Russell James, Fairfield, OH, United States
Raymond T., Pleasant Plain, OH, United States

| | NUMBER | DATE |
|---------------------|--|--------------|
| PATENT INFORMATION: | 412 | 19990622 |
| APPLICATION INFO.: | 8-159698 | 19980924 (9) |
| RELATED P. INFO.: | cont. of Ser. No. US 1996-756085, filed on 25 Nov 1996, is a continuation-in-part of Ser. No. US 7-003, filed on 7 Jun 1995, now patented, Pat. 53189 | |

CAS INDEX IS AVAILABLE FOR THIS PATENT.

AB The object inven relates to compounds having the structure:
##-## wherein n is an integer from 1 to about 3;

CAS INDEXED. IS AVAILABLE. THIS PATENT.

DETD . . . to respiratory challenges such as inhaled citric acid. (See, e.g., Callaway, J. & . . . , "Effects of Inhaled .alpha.2-Adrenoceptor agonists on Citric Acid-Induced Cough and Tidal Volume in Guinea Pigs", European Journal of Pharmacology, Vol. . . . (1992), The effectiveness of other .alpha.2 agonists in the management of neurologic disorders has been demonstrated, including attention-deficit hyperactive disorder and Tourette's syndrome (e.g., Chappell P., M. Riddle, L. . . . , K. Lynch, . . . , A. Arnsten, J. Leckman & D. Cohen, "Clonidine treatment of comorbid attention-deficit hyperactivity disorder and Tourette's syndrome: preliminary clinical experience", Journal of the American Academy of Child and Adolescent Psychiatry, Vol. . . . (1991), pp. 1140-1146), cognitive disorders. . . .

L10 ANS: 7 OF 45 US AP
ACCESSION: ER: 68-18 USPATFULL
TITLE: 6-(4-pyrazolinylamino) quinolines useful as alpha-2
agonists
INVENTOR: Lee, Oxford, OH, United States
Lee J., Cincinnati, OH, United States
Gray J., Hamilton, OH, United States
Monroe T., Pleasant Plain, OH, United States
Russell James, Fairfield, OH, United States
Ellen E., West Chester, OH, United States
Sophie E., Maineville, OH, United States

to which is effective to reduce or alleviate at least one
 c symptoms of Tourette's Syndrome, obsessive-compulsive disorder,
 c schizophrenia or other mammal.
 CAS INDEX AVAILABLE TO PATENT.
 DETD has an inhibitory effect of nicotine with respect
 to an enzyme converts glutamate into gammaaminobutyric acid
 (GABA)
 GABA The ratio of glutamic acid to GABA
 (GABA) in the brain plays a crucial role in brain
 an inhibitory transmitter. GABA is an
 inhibitory transmitter. Furthermore, the concentration of glutamate and
 GABA is higher than they are in the rest of the
 b GABA has a higher concentration of glutamate and GABA
 b GABA has a higher concentration of glutamate and GABA
 m GABA has a higher concentration of glutamate and GABA
 e GABA has a higher concentration of glutamate and GABA
 T GABA has a higher concentration of glutamate and GABA
 i GABA has a higher concentration of glutamate and GABA

L10 ANS OF 45
 ACCESSIO R: 2001 DERWENT INFORMATION LTD
 DOC. NO. 16] WPIDS
 TITLE: GABA-uptake related disorders - used for
 headaches, dementia, alcohol withdrawal
 spasticity, growth disturbances, tardive
 dyskinesia or alcohol abuse.

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 PATENT A(S): NO-NORDISK AS
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| PAT | KIND | NO | LA | PG |
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| DK | A | 19980528 | 1 | 1 |

APPLICAT TAILS:

| PAT | KIND | APPLICATION | DATE |
|-----|------|-------------|----------|
| DK | A | DK 1998-727 | 19980528 |

PRIORITY INFO: 19980528
 AN 19980528 [46]
 AB DK 19980528 A U 1 118
 Met the t GABA-uptake related disorders such
 as headac i, alcohol withdrawal symptoms, spasticity,
 gro turbanc e, dyskinesia, alcohol abuse, **stuttering**
 , h hes, H chorea, Gilles di le **Tourettes**
 syn incont e, atic neuropathy and postherpetic neuralgia.
 Dwg
 AB DK 19980528 A U 1 118
 Met the t GABA-uptake related disorders such
 as headac ia, alcohol withdrawal symptoms, spasticity,
 gro turbanc e, dyskinesia, alcohol abuse, **stuttering**
 , h hes, H chorea, Gilles di le **Tourettes**
 syr incont e, atic neuropathy and postherpetic neuralgia.
 Dwg

L10 ANS 0045 COPYRIGHT 2001 BIOSIS DUPLICATE 4
 ACCESSIO 1 BIOSIS
 DOCUMENT 1 511
 TITLE: A patient with glutamate decarboxylase in a patient with
 cerebellar degeneration and Sjogren syndrome.
 AUTHOR(S) Nakamura; Harada, Toshihide; Kamei, Hidekazu;
 CORPORAT Internal Med., Hiroshima Univ. Sch. Med., 1-2-3
 Hiroshima 734 Japan
 SOURCE: Jpn J Rheumatol (Tokyo), (Feb., 1998) Vol. 50, No. 2, pp.
 169.

DOCUMENT LANGUAGE English
 SUMMARY
 AB We report a 52-year-old woman with Sjogren syndrome from the age of 46,
 developing cerebellar atrophy, autonomic dysfunction and **dysarthria**.
 At the time of diagnosis, all known causes of cerebellar
 degeneration, including the presence of autoantibodies
 directed against glutamate decarboxylase (GAD) which was an enzyme
 involved in the synthesis of **GABA**. She also had
 autoantibodies specific with Sjogren syndrome (SS-A,
 anti-nuclear antibody changed into negative after high dose
 corticosteroid therapy, but symptoms did not
 improve. Western blot analysis showed abnormal bands to human neuroblastoma cell
 line SK-N-SH, which were relatively specific to nervous tissue.

In this patient, cerebellar atrophy and atrophy were caused by autoimmune
 pathology involving the cerebellar GABAergic system and central nerve

AB We report a 52-year-old woman with Sjogren syndrome from the age of 46,
 developing cerebellar atrophy, autonomic dysfunction and **dysarthria**.
 At the time of diagnosis, all known causes of cerebellar
 degeneration, including the presence of autoantibodies
 directed against glutamate decarboxylase (GAD) which was an enzyme
 involved in the synthesis of **GABA**. She also had
 autoantibodies specific with Sjogren syndrome (SS-A,
 anti-nuclear antibody changed into negative after high dose.

L10 AL 0047 COPYRIGHT 2001 INIST-CNRS. ALL RIGHTS RESERVED.
 ACCESSIO 1 25 PASCAL
 COPYRIGHT 1 1996 INIST-CNRS. All rights

TITLE (E) A patient with a Tourette-like syndrome with
 ofloxacin
 AUTHOR: J. J.; REAGAN D. R.; RODRIGUEZ DE BITTNER M.
 MARTINEAU P. (trad.)
 CORPORAT Tennessee State Univ., James H Quillen coll.
 of internal medicine, Murfreesboro TN
 United States
 SOURCE: J Clin Pharmacol Ther, (1996), 30(2),
 138-141,

DOCUMENT 0280
 (case report, clinical case); Translation

BIBLIOGRAPHIE :
 COUNTRY : France
 LANGUAGE : French
 SUMMARY :
 AVAILABILITY : 5, 354000052895180050
 AN : 1998
 CP : Co
 ABFR : OF
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CT-CNRS. All rights reserved.
 relation entre l'emploi de la fluoroquinolone
 et le developpement d'une encephalopathie
 caracteristiques similaires au syndrome de La
 Tourette, relie dans le temps
 avec l'ofloxacin, fut observe chez un
 homme disparut completement apres
 l'arret du traitement. Les caracteristiques les plus remarquables
 de ce syndrome sont la coprolalie ; on a egalement observe de
 des automatismes orofaciaux et des membres,
 l'amelioration de l'annee concernant l'episode pendant la
 clinique avait plusieurs points en commun
 avec la Tourette et possiblement avec de
 l'origine du lobe frontal.
 Les examens neuroradiologiques, et du liquide
 cerebrospinal : Les effets neurotoxiques documentes
 de l'ofloxacin, l'insomnie, les convulsions, le delire, et
 les proprietes antagonistes du
 GABA. Il s'agit ici du premier
 rapport au syndrome de La Tourette,
 associe a une quinolone, suggerant une interaction
 avec les neurotransmetteurs dopaminergiques
 centraux. Les effets de medicaments qui, comme l'ofloxacin,
 agissent dans le systeme nerveux central,
 associee aux maladies ou a l'age
 de substances telles la theophylline et les
 stimulants, et possiblement l'augmentation de la
 sensibilite, classent la personne agee dans un groupe
 a risque de toxicite aux quinolones. Les ajustements
 des doses des effets indesirables au niveau du
 systeme central sont primordiaux.
 ABFR. L'ofloxacin chez un homme age et le developpement
 d'un syndrome presentant des caracteristiques similaires
 au syndrome de La Tourette.
 SUMMARY DU CAS Un syndrome insolite,
 relation d'un traitement avec l'ofloxacin,
 fut observee. L'annee concernant l'episode pendant la
 clinique avait plusieurs points en commun
 avec la Tourette et possiblement avec de
 l'origine du lobe frontal.
 Les examens neuroradiologiques, et du liquide
 cerebrospinal : Les effets neurotoxiques documentes des
 de l'ofloxacin, l'insomnie, les convulsions, le delire, et la
 des proprietes antagonistes du GABA.
 Il s'agit ici du premier rapport d'un
 cas associe a la Tourette, associe a
 l'ofloxacin, suggerant une interaction possible avec
 les neurotransmetteurs dopaminergiques centraux. CONCLUSIONS

ACCESSION
DOC. NO.
TITLE:

16 [2] WPIDS
75

ons of sugars and amino acids, opt with other
for treatment of, e.g., Alzheimer's disease,
n, hair loss, cancers, hypertension, etc.

DERWENT
INVENTOR
PATENT A
COUNTRY
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APPLICAT

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APPLICATION

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EP 1993-308852 19931105

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one or more pure sugars selected from meso
alactose, D(+)lactose, D(+)xylose, dulcitol,
, D(-)mannitol, sorbitol, D(+)glucose,
se, cellobiose, D(+)maltose, D(+)raffinose,
e, D(-)ribose, adonitol, D(+)arabitol,
L(-)fructose, D(-)lyxose, L(+)lyxose, L(-)lyxose,
amine and D galactosamine; and (b) one or more
glutamine, lysine, arginine, asparagine,
glutamic acid, glycine, histidine, leucine,
alanine, serine, threonine, tryptophan,
ne.

are capable of passing through the

blood-brain

barrier

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and

(i) restoring impeded neuro-transmitter
of other materials (e.g. beta-carotene,
calcium, somastatin, vasopressin, endorphin,
histidine, GABA, dynorphin, L-tryptophan,
oxytocin, niacin, L-arginine, hydroxyproline, NGF,
aspartic acid, phosphorus, chlorine, sodium, vitamins A,
phosphate, selenium, linolenic acids, etc.)
carrier, or (iii) otherwise facilitating the
materials in the chemical processes of the
together with these other materials) may be
dependence, drunkenness, Alzheimer's disease,
anemia, loss of hair, depression, insomnia,
muscle disorders, stress, headache,
anorexia, panic disorders,
dystrophy, cerebral palsy, Parkinson's
cancers, acne, psoriasis, eczema,
sclerosis, AIDS, chronic fatigue, ageing
also be used in athletic drinks.

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... neurotransmitter function, (ii) transporting
 ... catecholamine, xanthophyll, lecithin, calcium,
 ... endorphin, enkephalin, acetyl-L-carnitine,
 ... GABA, choline, thiamine, pyridoxine,
 ... oxyproline, NGF, methionine, cystine, potassium,
 ... sodium, vitamins A, B, C, K, . . . dependence,
 ... diseases, Huntington's disease, schizophrenia,
 ... chronic pain, osteoporosis, heart muscle
 ... e, **stuttering**, poor memory, bulimia,
 ... ts, anxiety, hyperactivity, muscular dystrophy,
 ... on's disease, hypertension, PMS, shock, cancers,

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 ... and some related psychopharmacological
 ... Tourette's syndrome: An update.
 ... B. . . Chokka, P. R.; Bornstein, R. A.
 ... Neurochem. Res. Unit, Dep. Psychiatry, Univ. Alberta,
 ... AB T6G 2B7 Canada
 ... of Psychopharmacology, (1995) Vol. 9, No. 3, pp.
 ... 9- 911.

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... of **Tourette's** syndrome (TS) suggest
 ... is disorder may be the result of an imbalance
 ... and/or neuromodulator systems. Neurochemicals
 ... include: catecholamines; acetylcholine;
 ... amines; the amino acids gamma-aminobutyric acid (GABA),
 ... and p-tyrosine; trace amines;
 ... and androgenic hormones. A suitable animal
 ... to advance our understanding of this disorder,
 ... recent developments in this regard.
 ... of **Tourette's** syndrome (TS) suggest
 ... is disorder may be the result of an imbalance
 ... and/or neuromodulator systems. Neurochemicals
 ... include: catecholamines; acetylcholine;
 ... amines; the amino acids gamma-aminobutyric acid (GABA),
 ... and p-tyrosine; trace amines;
 ... and androgenic hormones. A suitable animal

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 AUTHOR:
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 ... on of **arthria** in multiple sclerosis by
 ... magnetic fields.
 ... Research Laboratories, Danbury, CT
 ... A.
 ... JOURNAL OF NEUROSCIENCE, (1995 Nov) 83 (1-2)

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Code: ISSN: 0020-7454.

Unit: Kingdom

Article (JOURNAL ARTICLE)

Journal

... or more of patients diagnosed with multiple
speech impairment (**dysarthria**) which in
... disabling. Currently there is no effective
the **dysarthria** of MS which occurs as a
... cerebellum and its outflow tracts. It was
extraoral application of brief AC pulsed
(EMF) in the picotesla (pT) range intensity
with MS sustained improvement in motor functions
... otology. This communication concerns two MS
patients with a progressive course who exhibited severe
dysarthria during the initial treatment
which resolved completely 3-4 weeks later. Since
it has been shown to alter: (a) the resting membrane
neurotransmitter release through an effect
on the intracellular calcium flux; and (b) the secretion of
melatonin which in turn influences the synthesis and release of
... **butyric**
... it is suggested that the
... **dysarthria** occurred as a result of
... neurotransmitter functions particularly 5-HT and
GABA.

... at least more of patients diagnosed with multiple
speech impairment (**dysarthria**) which in
... disabling. Currently there is no effective
the **dysarthria** of MS which occurs as a
... cerebellum and its outflow tracts. It was
... motor functions including cerebellar
... This communication concerns two MS patients with a
chronic
... exhibited severe **dysarthria** which
... the initial treatment with pulsed EMFs and which
... weeks later. Since application of ... flux;
... melatonin which in turn influences the
... in (5-HT) and **gamma-**
... in the
... the immediate improvement of the
... of changes in cerebellar
... particularly 5-HT and **GABA** rather

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... (15, No. 5, 408-25, 1992) 2 Tab. 154

ISSN: 0722-5091

... Psychiatry, Middlesex Hospital, London W1N

...

FIELD AVAILABLE

FILE SEQUENCE

AN 1993-

AB The contraindications between stimulants e.g. dextroamphetamine (dexamphetamine), amphetamine, l-amphetamine, or methylphenidate in the treatment of Tourette's syndrome (GTS) is reviewed considering the relationship between attention deficit-hyperactivity disorder (ADHD) and the contraindications to treatment with stimulants. Neurobiochemical systems considered are dopamine (DA), norepinephrine (noradrenaline), 5-HT, ACh, GABA and clonidine. The drugs of choice for GTS are DA antagonists and clonidine. ADHD are stimulants. Stimulants may cause tics, which are weighed up against the benefits of their use. Side-effects of clonidine (DA antagonist) are depression/dysphoria, sedation and hypotension. CL may be the drug of choice for a patient with both ADHD and GTS.

ABEX High doses of stimulants, e.g. pemoline, L-amphetamine and dextroamphetamine, to treat ADHD can provoke or exacerbate tics or GTS in patients without these preexisting symptoms. Tics are

less likely to be provoked by stimulants in patients treated with haloperidol. There is evidence that stimulants and butyrophenones are simply antagonistic to each other but have overlapping effects on tics and side-effects. Levodopa given to patients with GTS can result in involuntary vocalization

and apomorphine can create and decrease GTS. Obsessive-convulsive disorder is treated with LSD and psilocin. CL is effective for both tics and hyperactivity but if hyperactivity is a significant problem, treatment with or without butyrophenones/benzamides may be tried in low doses and with relevant monitoring. The neurobiology of GTS is based on the release of dopamine from pre-synaptic nerve terminals. Abnormalities of neurotransmitters such as DA, noradrenaline, 5-HT, ACh, GABA and clonidine (e.g. dynorphin) are noted in GTS. Other drugs used in the treatment of GTS include sulpiride, fluphenazine, naltrexone, clomipramine, methylphenidate, clonazepam, nifedipine, verapamil, fluphenazine, progabide and physostigmine. Other treatments include amitriptyline, desipramine,

imipramine, bupropion, phenhydramine, chlorpromazine, propranolol and carbamazepine (E.E.).

AB The contraindications between stimulants e.g. dextroamphetamine (dexamphetamine), amphetamine, l-amphetamine, or methylphenidate in the treatment of Tourette's syndrome (GTS) is reviewed considering the relationship between attention deficit-hyperactivity disorder (ADHD) and the contraindications to treatment with stimulants. Neurobiochemical systems considered are dopamine (DA), norepinephrine (noradrenaline), 5-HT, ACh, GABA and clonidine. The drugs of choice for GTS are DA antagonists and clonidine. ADHD are stimulants. Stimulants may

L10 ANSWER 2

ACCESSION NUMBER

TITLE:

AUTHOR:

LOCATION:

SOURCE:

Ref.

JOHN R. BRIGHT 2001 DERWENT INFORMATION LTD

DERWENT INFORMATION LTD

1-4 Lactam Antibiotics: Predisposing

to Sepsis.

Authors: O; Norrby S R

Location: Sweden

Source: J. Antimicrob. Chemother. (27, No. 4, 405-25, 1991) 3 Tab. 169

AVAIL. OF DOC.:
Umea,

ISSN: 0305-7453

Pharmacology, University of Umea, S-90185

LANGUAGE:
DOCUMENT TYPE:
FIELD AVAIL.:
FILE SEGMENT:

AN 1991-27570

AB Neurotoxic
benzylpeni
(AM),

oxacillin
ticarcillin
cefonicid
cefotaxime
and imipen
drugs ment

halothane,

propanidid
amphetamin

physostigmine,

isoniazid,
cyclosporin

ABEX Neurotoxic
and epilep

Highest po
meropenem

myasthenia
myoclonus,

delerium,

headache,

recorded f
CX, CD, CU

warfarin,
Drugs know

fentanyl,
enflurane,

theophyllin
phenylprop
metronidaz

and

cyclosporin
sensitivit

are discus

/3H/flunit
cefamandol

ABEX. . . and
myasthenia

myoclonus,
delerium,

headache,
recorded f

to

hexobarbit
In pathoge

GABA, pent
azlocillin

L10 ANSWER 30

Neurotoxic activity, of beta-lactams e.g.
benzylpenicillin (CF), ampicillin (AP), amoxicillin

oxacillin (CO), nafcillin (NC), carbenicillin (CB),
ticarcillin (TP), cefaloridine (CR), cefalotin (CT),
cefonicid (C), cefmetazole (CZ), cefacetrile (CA),
cefotaxime (CD), cefuroxime (CU) and latamoxef (LM),
imipenem and FCE-22101 are reviewed. Other
drugs ment fentanyl, meperidine, ketamine,

propanidid, theophylline, aminophylline,
amphetamin, terbutaline, phenyl-propanolamine,

physostigmine, isoniazid, chlorambucil, misonidazole and

Neurotoxicity by beta-lactam antibiotics occur frequently
and are observed after very high systemic doses.

Drugs with BP, CF and imipenem/cilastin (also
known as Zim) are more of seizures, aggravation of

symptoms, confusion, nystagmus, encephalopathy,
myoclonus, rapid eye movements, tachycardia,

delirium, rapid eye movements, tachycardia,
headache, myoclonus and neuromuscular excitability are

recorded for CX, CD, CU, CB, TC, PP, CR, CT, CF, CN, CL, CZ, CA,
FCE-22101, tobramycin, cefoperazone or amikacin.

Factors include concurrent or prior BP,
fentanyl, pentazocine, propoxiphen, halothane,

enflurane, lidocaine, procaine, etidocaine,
theophylline, ephedrine, terbutaline,

phenylpropylamine, physostigmine, isoniazid,
metronidazole, quinolones, chlorambucil, misonidazole

Neurotoxicity in rats and increased
sensitivity to thiobarbital and influence of probenecid

are discussed for dicloxacillin, phenethicillin,
flunitrazepam, cefazolin, cefotaxime, cefepime,

cefazolin, cefepime, cefazolin, cefepime, cefazolin,
cefazolin, cefepime, cefazolin, cefepime, cefazolin,

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cefazolin, cefepime, cefazolin, cefepime, cefazolin,

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| ACCESSION NUMBER | 91-07-01 M S |
| TITLE: | Side-Effects of Various Antibacterial |
| AUTHOR: | |
| LOCATION: | Ny, West |
| SOURCE: | Lipid. 1, S29-S32, 1991) 87 Ref. ISSN: 0300-8126 |
| AVAIL. OF DOC.: | Ulrik, Universitaet Goettingen, ssd 5, W-3400 Goettingen, Germany. |
| LANGUAGE: | |
| DOCUMENT TYPE: | |
| FIELD AVAIL.: | |
| FILE SEGMENT: | |
| AN 1991-12408 | |
| AB Side-effect | on the CNS are reviewed with reference to |
| quinolone | illins, cephalosporins, |
| erythromyc | , metronidazole, isoniazid, sulfonamides and |
| tetracyclin | |
| ABEX CNS-effect | clude fits, headaches, vertigo, visual |
| disturbanc | ects, sleeping problems, psychoses, |
| lassitude | |
| and confus | similar to those of nalidixic acid, |
| rosoxacin | |
| and pipede | cacin, ofloxacin and ciprofloxacin can act |
| through in | -metabolism of theophylline, caffeine and |
| paraxanthin | A-receptors, through |
| pyschoanal | ated to the structural similarities to |
| amfonelic | tarine-like effects. Quinolone-psychoses can |
| be treated | , and benzodiazepines can be used in cases |
| of convuls | illins (amoxicillin, carbenicillin, |
| ticarcillin | methylpenicillin, oxacillin, cloxacillin, |
| dicloxacill | symptoms including psychoses with |
| agitation, | |
| disorientat | inations and sleeping problems. Benzathine- |
| and procain | cause a psychiatric symptom-complex |
| (procaine) | etine also has CNS toxicity. I.v. |
| cephalospo | inations, convulsions, disorientation and |
| restlessne | can cause anxiety and optical |
| hallucinati | |
| Gentamicin | and encephalopathy in adults, and |
| kanamycin | s and visual disturbances. Metronidazole |
| can | |
| cause ence | visions, ataxia, dysarthria and |
| cerebellar | izic can cause vertigo, excitation, cerebral |
| organic ps | , convulsions and hyper-reflexia. |
| Sulfanilam | can cause sight disturbances, vertigo, |
| depression | y psychoses. (S67/LJ) (Zentralnervose |
| Nebenwirk | antibakterieller Substanzen.) |
| ABEX . . . and | No-floxacin, ofloxacin and ciprofloxacin can |
| act through | 50-metabolism of theophylline, caffeine and |
| paraxanthin | A-receptors, through |
| pyschoanal | ter to the structural similarities to |
| amfonelic | tarine-like effects. Quinolone-psychoses can |
| be treated | psychoses and encephalopathy in adults, |
| and kanamy | blems and visual disturbances. |
| Metronidazole | |
| can cause | visions, ataxia, dysarthria and |
| cerebellar | can cause vertigo, excitation, cerebral |
| organic ps | , convulsions and hyper-reflexia. |
| Sulfanilam | can cause . . . |

L10 ANSWER 31
 ACCESSION NUMBER:
 TITLE:
 AUTHOR:
 CORPORATE SOURCE:
 LOCATION:
 SOURCE:
 Tab. 21 R.
 AVAIL. OF DOC.:
 LANGUAGE:
 DOCUMENT TYPE:
 FIELD AVAIL.:
 FILE SEGMENT:
 AN 1989-30106
 AB P.o. vigabatrin administered to patients with drug-resistant complex partial epilepsy. Effects included **stutter**, drowsiness, loss of concentration and irritability and increased vigor.
 VB resulted in a decrease in seizure frequency when administered with drug-resistant complex partial epilepsy. Effects included **stutter**, drowsiness, loss of concentration and irritability and increased vigor.
 returned to pretreatment levels of free and total GABA and homovanillic acid (HVA) after a single dose of VB but subsequent dosing schedules. In contrast, 5-HIAA concentrations increased with the single dose but were not significantly altered by alternate day and daily VB. Drugs included phenytoin (PH), carbamazepine (CB) and p.o. VB.
 ABEX 11 Patients with drug-resistant epilepsy were admitted to the study. 2 Patients were treated with CB alone, 2 with both CB and p.o. VB, 50 mg/kg as add-on therapy. The morning dose. The patients then received 50 mg/kg every other day for a further 2 weeks. The dosage interval was reduced to daily administration. CSF total and free GABA and HVA levels were increased, compared with pretreatment values, 2-fold after a single dose of VB and remained elevated at subsequent dosing. Increases were dose-dependent. VB was administered with every 3rd day dosing and every other day dosing. CSF concentrations of 5-HIAA decreased over pre-treatment levels. A significant increase in values observed after alternate day dosing returned to pre-treatment concentrations. CSF concentrations following single VB dosage. 1 Patient had a decrease in concentration and development of a **stutter** and irritability and increased vigor. 1 Reported mild drowsiness. 3rd day 4/11 patients had a decrease in seizure frequency. 10% while 1 patient increased frequency. With alternate day dosing had a greater than 50% decrease in seizure frequency in 8/10 cases including

eliminated in 2. (Y112/SEB)
 AB. . . adm. . . with drug-resistant complex partial
 epilepsy. . . progressively decreased with decreasing
 dosing intervals. Side effects included **stutter**, drowsiness,
 loss of consciousness, and irritability and increased vigor.
 VB
 resulted in increases in CSF levels of free and total
GABA and . . . CSF concentrations of homovanillic
 acid (HVA) . . . significantly after a single dose of VB but
 returned to . . .
 ABEX. , the dosage interval was reduced to
 daily administration. CSF total and free **GABA**
 and HVA increased, compared with pretreatment
 values, of VB and remained. increased
 following patient had to withdraw because of
 drowsiness and development of a **stutter**.
 Another symptoms and irritability. 2
 Patients 1 Reported mild drowsiness. With VB
 given even

L10 ANSWER 3
 ACCESSION NUMBER
 TITLE: 2001 DERWENT INFORMATION LTD
 T B V
 acidemia Type I: Effect of Riboflavin and
 AUTHOR: Goodman S I; Batshaw M L
 LOCATION: Durham, Denver, Colorado, United States
 SOURCE: 1, 62-65, 1988) 1 Fig. 1 Tab. 15 Ref.
 ISSN: 0022-3476
 AVAIL. OF DOC.: Institute, 707 N. Broadway, Baltimore, MD
 LANGUAGE:
 DOCUMENT TYPE:
 FIELD AVAIL.:
 FILE SEGMENT:
 AN 1988-104
 AB A 5-yr-old glutaric acidemia associated with
 progressive epilepsy and basal ganglia degeneration and
 who responded (RF) and l-carnitine (CT) with
 evidenced
 of biochemical improvement, is reported. Neither agent
 reduced of acid (GA), but RF increased GABA levels.
 A trial of discontinued because of severe lethargy
 and
 vomiting.
 ABEX The patient until 11 mth of age when he had a 3 day
 episode and low-grade fever that led to seizures
 and
 coma. The viral encephalitis. After this he lost
 some development hypotonic and had choreoathetoid
 movements his skills but at 24 mth, he had a 2nd
 viral-like with severe lethargy and vomiting. CT
 showed brain He continued to lose motor skills
 and
 at 45 mth sturring. He was unable to sit without
 support, hypotonia and choreoathetosis was noted
 on volitional his **dysarthrit**; IQ was 50-55.
 Glutaric diagnosed on finding peaks of GA (9-24
 ug/ml) and of urine specimens. Plasma GA was 11
 ug/ml. by finding less than 1% of normal

activity in fibroblasts. Magnetic resonance imaging showed bilateral lobe atrophy and fibrosis and hyperlucency of the caudate nucleus. He was put on a protein restriction diet. He received 100 mg/day p.o. RF for 1 wk, 100 mg/kg/day RF+CT continuously. Before treatment, CSF levels of GABA were decreased and HVA and HIAA were normal. RF had no effect on GA but raised GABA to normal. Long term RF+CT treatment was associated with improvement and the rapid progression of the neurodegeneration (E54/RSV) (M.L.B.).

ABEX. hypotonia was diagnosed by GLC/MS. continued treatment with GABA was on GA but short-chain amino acids were normal. Long term treatment was

L10 ANSWER
 ACCESSION NUMBER
 TITLE:
 AUTHOR:
 LOCATION:
 SOURCE:
 AVAIL. OF DOCUMENT

LANGUAGE:
 DOCUMENT TYPE:
 FIELD AVAIL.:
 FILE SEGMENT:
 AN 1987-24
 AB Drugs and Parkinson's
 long term use of anticholinergics and other drugs in the treatment of dystonic syndromes, Gilles de la Tourette syndrome and Wilson's disease.
 ABEX Aspects of levodopa therapy are discussed. Levodopa is given with anticholinergics which reduce the peripheral but not the central effects of levodopa.
 levodopa dosage has been optimized. The use of methylergine, methylergide and amitriptyline have been associated with symptoms. Levodopa may cause melanoma.
 orphenadrine HCl is an anticholinergic with fewer side effects than
 anticholinergics of the antiparkinsonian effect of

amantadine, procryptine, lisuride and pergolide are useful 2 receptor agonists. Lergotrile mesylate and mesoridazine are neuroleptics. Other drugs with possible usefulness include threodihydroxyphenylserine, (+)-4-propyl, propranolol and clonazepam. The treatment of Huntington's disease, Gilles de la Tourette disease is briefly discussed, with reference to amazine, trihexyphenidyl, ethopropazine, choline, benzotropine, isoniazid, sodium valproate, gamma-vinyl GABA, gaboxadol, fluphenazine, lithium carbonate, nitrous oxide, clonidine and zinc sulfate or acetate. (E33/JB)

ABEX. 9-hydroxy, threodihydroxyphenylserine, (+)-4-propyl and clonazepam. The treatment of dystonia, Gilles de la Tourette disease, is briefly discussed, with reference to trihexyphenidyl, ethopropazine, choline, arecoline, isoniazid, sodium valproate, gamma-vinyl GABA, gaboxadol, fluphenazine, reserpine, lithium carbonate, nitrous oxide, clonidine, penicillate or acetate. (E33/JB)

L10 ANSWER 2001 BIOSIS DUPLICATE 7

ACCESSION NUMBER
DOCUMENT NUMBER
TITLE:

TREATMENT OF EPILEPSY A DOUBLE-BLIND STUDY.

AUTHOR(S): SALIMBERTI C A; HARDENBERG J; ORWIN J;

CORPORATE SOURCE: "MONDINO," VIA PALESTRO 3, 27100 PAVIA,

SOURCE: 7 (6), 717-723.
0013-9580.

FILE SEGMENT:
LANGUAGE:

AB The efficacy of gabapentin (gamma-vinyl GABA, GVG), given as a double-blind, randomized, crossover design. The study consisted of two 7-week periods in random order. Patients weighing < 65 kg received 1500 mg twice daily for patients weighing > 65 kg. Three reasons unrelated to treatment were reported: vertigo, headache, dysarthria. When gabapentin was stopped (3 g daily), the number of seizures available for analysis showed a decrease in seizure frequency and 4 of the total number of seizures and the number of patients who dropped out were severe adverse effects. Both the total number of seizures and the number of patients who dropped out were significantly reduced by gabapentin. Mild effects were reported on gabapentin and in one on placebo, were also seen with six patients who were being while receiving gabapentin as compared with placebo period. No consistent changes in electroencephalogram (EEG), and visual-evoked potentials were seen during the study.

Serum levels of phenytoin remained unchanged, with the phenytoin during vigabatrin in the only study to include that add-on treatment with vigabatrin in adult patients with drug-resistant partial seizures. The efficacy of vigabatrin (γ -vinyl GABA, GVG), in 3 adult outpatients with severe drug-resistant partial seizures, were studied using vigabatrin. In this study, two reasons unrelated to treatment were the appearance of vertigo, headache, and dysarthria, which resolved rapidly when vigabatrin was stopped. 20 patients available for analysis.

L10 ANSWER 2001 DERWENT INFORMATION LTD
 ACCESSION NO 17 3 P S
 TITLE: Y
 AUTHOR: G S Z an E
 LOCATION: F
 SOURCE: 05-22, 1986) 3 Fig. 9 Tab. 177 Ref. SSN: 0037-1777
 AVAIL. OF DOCUMENT: H versitaire de Psychiatrie, Centre de la Nacre, 14033 CAEN CEDEX, France.

LANGUAGE:
 DOCUMENT TYPE: 1
 FIELD AVAILABLE:
 FILE SEGMENT: t
 AN 1986-1
 AB Anxiolytic drugs: particular reference to their chemical structure, pharmacokinetics, efficacy and mode of action, interactions, side effects and therapeutic uses. The benzodiazepines (BZ) are the most widely used anxiolytic drugs. Rapidly acting BZ include clonazepam, chlordiazepoxide, clobazam, diazepam (DZ), loflazepate, lorazepam, midazolam, and zolpidem. These drugs are rapidly absorbed by the GI tract and pass easily into the CNS, where they bind to GABA receptors and act as allosteric modulators. The clinical effects, muscle relaxants and anxiolytics, are dependent on pharmacokinetics. The anxiolytics including benzodiazepines, barbiturates, hydroxyzine, medifoxamine, meprobamate, pentynol, methaqualone, mephensin, and octamide may also be used. Barbiturates, chlorpromazine, amitriptyline, and alcohol also have anxiolytic effects. Salbutamol, yohimbine, caffeine, and BZ undergo hepatic metabolism with metabolites e.g. desmethyl DZ and renal excretion. The BZ induced sedation are fatigue, vertigo, dysarthria, ataxia and the risk of sedation. Other interactions with cimetidine, disulfuram, p.o. have been reported. The BZ have been used in the future it may be possible to identify the specific receptor antagonist (antagonists) which pass easily into the CNS, where they

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and

are coupled to **GABA** receptors
olytics, muscle relaxants and
gent is dependent on pharmacokinetics
ethyl DZ and renal excretion as
uced sedation are fatigue, somnolence,
hria, ataxia and obnubilation;
ation. Other interactions with tobacco,
ine, disulfuram, p.o. contraceptives

L10 ANS
ACCESSION
DOCUMENT
TITLE:
AUTHOR:
CORPORATE
States
SOURCE:
COUNTRY:
DOCUMENT
FILE SEGI

2001 ELSEVIER SCI. B.V.DUPLICATE 8

treatment of tardive dyskinesia and other

n J.E.; Simpson M.L.; et al.
psychopharmacology, Palo Alto Veterans
cal Center, Palo Alto, CA, United

ry, (1985) 20/8 (888-893).

ature Index

LANGUAGE:
AB We
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GAB
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nd Neurosurgery
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of gamma-vinyl-**GABA** (GVG) in
dyskinesia, one with Meige syndrome,
tardive dyskinesia patients
and, as a group, demonstrated
a scores. Four of these five tardive
ally evident improvement, with
kinetic symptoms. Other patients had no
patients had transient exacerbation of
withdrawal of GVG, and one patient
al episodes. Our results suggest that
treating patients with tardive
of gamma-vinyl-**GABA** (GVG) in
dyskinesia, one with Meige syndrome,
tardive dyskinesia patients
and, as a group, demonstrated
a scores.. . .

L10 AN
ACCESSION
TITLE (I
AUTHOR:
CORPORATE
SOURCE:
2

2001 INIST-CNRS. ALL RIGHTS RESERVED.
PASCAL
ABA treatment of tardive dyskinesia and
disorders
HORNTON J. E.; SIMPSON M. L.; BERGER P.
M. J.
t., Palo Alto CA, United States
chiatry, (1985), 20(8), 888-893, refs.

BIBLIOGRAPHY

COUNTRY:

LANGUAGE:

AVAILABILITY:

AN 198

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TITLE:

AUTHOR:

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TITLE:

AUTHOR(S)

CORPORATION

SOURCE:

T 2001 ELSEVIER SCI. B.V.DUPLICATE 9

Treatment of hyperkinetic extrapyramidal

E.; Braendgaard H.

ology, Aarhus Municipal Hospital,

Scandinavica, (1985) 72/3 (341-343).

Literature Index

and Neurosurgery

BY

-receptor agonist, progabide,

movements was evaluated in a preliminary

10 males and 7 females, aged 10-78 years,

patients were included in the study. Daily

0 to 3600 mg (median 2400 mg)

45 mg/kg), while the duration of

Improvement, with a reduction of

%, occurred in two of four patients

, and in two of three patients

, while no consistent beneficial

patients with Huntington's chorea,

on dystonia, tardive dyskinesia, action

to-branchio-respiratory myoclonus.

-receptor agonist, progabide,

movements was evaluated in a preliminary

males and. . . weeks. Improvement,

movements exceeding 25%, occurred in two

la Tourette's syndrome, and in

arapic intention myoclonus, while no

were registered in ten. . .

T 2001 BIOSIS

DUPLICATE 10

TYPE I PRESENTING WITH HYPOGLYCEMIA.

CLASS G J A I

UNIV. LONDON, 30 GUILFORD ST., LONDON

IS, (1984) 7 (3), 122-124.

: 0141-8955.

FILE SECT
LANGUAGE:

AB A c... enzyme deficiency (type I glutaric
aci... subdural hydromas, and progressive
cho... the diagnosis was made when she
was... at the age of 3.5 yr. Temporary
adr... also noted. Three years after diagnosis
the... hypoglycemia have resolved and treatment
wit... GABA analog, has prevented any
fur... deterioration.

AB A c... enzyme deficiency (type I glutaric
aci... subdural hydromas, and progressive
cho... the diagnosis was made when she
was... at the age of 3.5 yr. Temporary
adr... also noted. Three years after
dia... and hypoglycemia have resolved and
tre... GABA analog, has
pre... deterioration.

L10 ANS... 2001 BIOSIS

ACCESSIO...

DOCUMENT

TITLE: ... AMMA AMINO BUTYRIC-ACID AND ADENOSINE
IN

EPILEPSY ... FLUID IN PROGRESSIVE MYO CLONUS

AUTHOR(S) ...

CORPORAL... K; FREDHOLM B B; HARE T A
... LTAVUORENPENGER 10 A, SF-00170 HELSINKI

SOURCE: ... 40 (10), 623-625.
... C003-9942.

FILE SECT
LANGUAGE:

AB Pro... without Lafora's bodies (PME) is a rare
inf... in Finland, where the incidence is
1 c... This fatal disease is characterized by
nor... progressive stimulus-sensitive myoclonus,
ata... grand mal seizures and loss of
cer... concentrations of GABA in the CSF
ave... (4-11 SE) in 8 patients with PME,
con... in 10 control patients. The
con... (10 pmol/ml vs. 17 pmol/ml), inosine (560
pmo... inosine (6.2 nmol/ml vs. 6.1 nmol/ml)
we... and in controls.

AB. ... 20,000-30,000 children. This fatal
dis... early development, progressive
sta... dysarthria, occasional
gro... cerebellar Purkinje cells. Concentrations
of ... 10 pmol/ml (mean \pm SE) in
8 ... 135 \pm ...

L10 A... 2001 DERWENT INFORMATION LTD

ACCESSIO...

TITLE: ... Syndrome.

AUTHOR:

LOCATION: ... States

SOURCE: ... 501, 1982)

ISSN: 0272-4391

AVAIL. C ... Texas Tech. University Regional

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SOURCE:

El Paso, Texas, U.S.A.

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phenobarbital was gradually changed

his Gilles de la Tourette

this case, successful, and should be

the mechanism of CP action in this

could be due to the inhibitory effect

facilitating activity. (congress).

Tourette syndrome had been treated

improvement of the tics and the

phenobarbital was gradually

Improvement in tics and few

initial CP treatment. Reduction of CP

tics and some grunting sounds.

at bedtime produced remarkable

within normal limits and he has been

during the past 8-mth period.

phenobarbital was gradually

treatment of his Gilles de la

was, in this case,

for clinical trial. The mechanism

not understood, but could be due to the

NS, and its GABA facilitating

2001 BIOSIS

3

3

CONSIDERATIONS AND A PHARMACOLOGICAL

THE EXTRAPYRAMIDAL SYSTEM.

DOGA; ANGELINI L

IC INFANTILE, IST. NEUROLOGICO C.

EVOL, (1982 (RECD 1983)) 2 (4),

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GAMMA AMINO
ACTIVITY STIFFNESS
TOURETTE SYNDROME BALLISM

2001 DERWENT INFORMATION LTD

THE INITIAL PERIOD OF STUTTERING

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77, NO.10, 1555-59, 1977)

isc
 ABEX. Alzheimer's disease.
 ext chorea can be reduced to some
 air (benazine, phenothiazines). Drugs
 isc (sodium valproate and
 uns) have been generally
 pil attempts with choline, arecoline or
 inc very briefly. . . . considered
 syndrome, syndromes such as Lesch-Nyhan
 pos (5-hydroxytryptophan), chorea, Gilles
 de tremor (sensitive to
 alc clonazepam), torsion dystonia and
 Alz

=> log h
 COST IN U

| SINCE FILE | TOTAL |
|------------|---------|
| ENTRY | SESSION |
| 228.17 | 232.43 |

FULL ESTI

DISCOUNT

CA SUBSCR

| SINCE FILE | TOTAL |
|------------|---------|
| ENTRY | SESSION |
| -2.35 | -2.35 |